

HMIS 101: Understanding the Interconnectedness of HMIS Data

00:05 Natalie: Hey, everybody, and welcome to HMIS 101. It's a really long title, but it's Understanding the Interconnectedness of HMIS Data. We wish that we could be there in person with you all today, but appreciate the chance to try to remotely connect with you. So my name is Natalie Matthews and I'm a HUD technical assistance or TA provider. I work for a company called Abt Associates and I'm just excited to spend the next hour or so going over what the heck HMIS is and really try to give us a fundamental understanding of the system. I'm going to turn things over to my partner in crime for our session today. So Nastacia, do you want to introduce yourself?

00:52 Nastacia: Absolutely. Thank you, Natalie. My name is Nastacia Moore and I too am a HUD TA provider. I am representing C4 Innovations based in Boston, Massachusetts. So, really happy to be present today.

01:10 Natalie: Alright. So before we get into the content, I wanted to spend a really brief moment describing what NHSDC is, and I'm gonna do my best not to slip into acronyms. But NHSDC stands for National Human Services Data Consortium, and they are the co-sponsor of this virtual training that you all are hearing right now. They have the conference twice a year, but normally the fact that that would be in person at with you all, and again, are making these trainings available so that we can all get the needed information on HMIS. If you wanna learn more about NHSDC, their website is just www.nhsdc.org, it's on the screen, and I definitely encourage you guys to look at that for more information.

02:01 Natalie: Alright, so very briefly, I'm gonna go over the learning objectives for today before turning it over for our first section. So again, this is really intended to be very introductory, so it is okay if you have no idea what HMIS is, or if you're brand new to it, or if you'd like a refresher, we're gonna run through all of it. We're gonna start with some history of HMIS and then go in to data collection and reporting. And the interconnectedness, where that comes in is we're gonna try to help get you all like figure out how these puzzle pieces go together. So as we're going through the content, hopefully you'll get a clear understanding from us and be able to think yourself locally about how data collection feeds into reporting, how governance kind of plays a role in all this, we're really gonna try to hit on all the high points in this webinar. With that, I'm gonna turn things over to Nastacia for our first section, overview of HMIS.

03:02 Nastacia: Alright, so an overview of HMIS. As Natalie already stated, very basic understanding of, what is HMIS? And so for those of you who are unfamiliar with HMIS, also known as the Homeless Management Information System, this is a locally administered database that captures client-level data about persons experiencing homelessness within your CoC. HMIS is an electronic data system tool specifically designed to capture this client-level information, including information over time. So HMIS houses characteristics such as service needs for men, women, and children experiencing homelessness, and the services provided to those clients. I believe it's also really important for you all to know that there is no single HMIS software, and there is no single platform used for this work. It's up to each CoC to designate and select its local HMIS vendor or software within its local HMIS system administration.

04:20 Nastacia: So, why is this thing so important? Let's talk about it. Let's talk about why this locally administered electronic data system is so important. So data from any local HMIS system can and should be used to inform community planning processes and drive decision-making ultimately. The chart above explains how the items listed work together to inform each system. So let's start at the top. What does informing national policy mean? Alright, it means that the national

data on homelessness collected informs all key policy decisions. What about the requirement by CoC and federal partners, what does that mean? Well see, every CoC is required to implement an HMIS system and is scored on its obligation as part of the annual CoC competition. So what about informing local planning? Let's talk about it. This is the part where HMIS data can be used to inform local planning and drive decision-making processes as well.

05:33 Nastacia: And lastly, the coordination of service provision in administration to enhance coordinated entry and case management. Big one right? Well see, this means HMIS can support both CE processes, coordinated entry processes, and client case plans among participating service providers. Now, if this went completely over your head, it's okay, let me sum it up. Let me sum it up again of what this chart is illustrating. One, HMIS provides significant opportunities to improve access and delivery to services for people experiencing homelessness, and to strengthen community planning and resource allocation. It helps to understand homelessness using client-level data to improve federal response efforts to ending homelessness. All CoCs, let me say it again, all CoCs are required to implement and operate a functioning HMIS and are scored on this based on their CoC program NOFA. And lastly, this is just good to know, almost all of the United States is now covered by an HMIS system or a comparable system.

06:58 Nastacia: Let's talk a little bit about the history or the early days of HMIS. So back in the '80s, 1980s, there was an increase in homelessness due to the de-institutionalization, paid hospitals were being not appropriate to fill the needs of person's experiencing severe mental illnesses. So as a result, persons experiencing severe mental illnesses were released from these hospitals to stand and support themselves pretty much. But there were other factors, there were other factors that played a part in... Of homelessness rather, and this included high arrest especially of black and brown people for drug offenses. There was lack of affordable housing and under-funded community treatments that, I wanna say, explain for the high rate of arrests of people with severe mental illness. So, as a result, HMIS began a grassroots effort in the mid-90s to use it's technology at the community level to improve its service delivery.

08:08 Nastacia: With this included CoC, Continuum of Care processes and community planning. Now, as this effort grew, it caught the attention of Congress. So recognizing the importance of community efforts to capture better data and around 2001, Congress issued a directed to HUD to provide data and analysis on the extent and nature of homelessness and the effectiveness of the McKinney-Vento Act. This included: One, developing un-duplicated counts of clients served at the local level; two, analyzing patterns of service use; and three, evaluating the effectiveness of these programs. In addition to these efforts HUD responded to these directives by convening community, so getting communities together, technology experts together and service providers and a process to inform the development of HMIS data and technical standards to standardize these methods for conducting what we know as one-night counts, that's a point in time.

09:30 Nastacia: HUD require all McKinney-Vento funded providers to support the implementation and participate in HMIS and made HMIS an eligible use of SHP. SHP, support for housing program funds. Through that came the NOFA. And then to support this effort, HUD also implemented a national technical assistance component to assist communities with the details of its implementation. So a lot's happening here, right? But that's not it. So between 2001 and 2005, communities began to implement HMIS and collect data to support program evaluation, community planning, funding request, and grant writing. Now, as the years went on, so each and every year, HUD increased the scoring in the NOFA process, for which HMIS implemented programs. HUD

also developed and published the first Annual Homeless Assessment Report. You all will probably see this listed as the AHAR, the A-H-A-R. Okay, so that happened back in 2007.

10:43 Nastacia: The AHAR is a report based on the universal data elements in HMIS standards and the information from the Housing Inventory Chart, the HIC, that provides aggregate data from communities to HUD via a web-based system called, the Homeless Data Exchange. Folks will also identify this as the HDX. So I know earlier Natalie mentioned we weren't gonna throw around all these acronyms, but I can't help it. There's just too many. But you all will see this as you continue in your work, you'll see these acronyms show up time and time again. So the HDX, so this report along with the data from the CoC NOFA application, it provides data for HUD and Congress to make programmatic and funding decisions for homelessness programs. Now, what about Congress?

11:33 Nastacia: So Congress continue to update that directive stating starting in about 2007 and then HUD must ensure full HMIS participation by all CoCs and that future CoC funding will fill the participation in the HMIS and AHAR. Around 2008, the CoC NOFA and HUD increased the scoring component for HMIS implementation and used 24 out of 100 possible points which effectively signal the importance of a fully functional HMIS and the shift towards evidence-based practices.

12:20 Nastacia: Let's talk a little bit about the CoC Interim Rule. Okay, so the CoC Interim Rule was a design to one, promote community-wide commitment to the goal of ending homelessness; two, to provide funding for efforts by non-profit providers, I'm talking States, local governments, to quickly rehouse people experiencing homelessness. This is also included our unaccompanied use. Three, promotes access and effective utilization of mainstream programs by homelessness individuals and families, and then to optimize self-sufficiency among individuals and families experiencing homelessness. Okay.

13:18 Nastacia: Federal Partner Participation. What does it look like? So this is a snapshot of where each program falls under the entity. So for example, so HUD. HUD has the CoCs, the ESG program, HOPWA, and then also includes special initiatives like the YHDP. Also, you look at Veteran Affairs program, happened around 2011, which hosts their GDP programs, your HUD-VASH and your SSVF. And then you have the Department of Health and Human Services. So around 2009, PATH was introduced and then 2013 you had your RYH, your Runaway Homeless Youth. So this will help put things into perspective when thinking about where programs fall and what participation.

14:27 Nastacia: Data strategy. Okay, so the strategic vision for how communities use data to end homelessness is laid out in HUD's SNAPS Data TA strategy. These goals represent three separate capacities needed to understand and develop solutions to ending homelessness within your local jurisdictions. SNAPS understands that communities need assistance and support to make these data improvements and so what SNAPS has done is, they've extended these goals to a three to five year measuring improvement effort, for communities to be able to intentionally make necessary improvements. So we understand that it takes time, and improvements and progress does not happen overnight. And so, what SNAPS said was, it looks at improvements within a three to five-year time period in order to see trends and data and improvements within that.

15:41 Nastacia: Let's talk about what these three strategies are. So the three strategies are intended to focus, prioritize, and advance data related to efforts to ending homelessness, and are intended to shape the delivery of HUD guidance and technical assistance, and also to ensure that communities

are leveraging these strategies to guide and prioritize their own work as well. HUD has developed several resources, and I mean several resources, to help communities and to support communities in realizing what's included within each strategy. This includes the HMIS suite, or the suite of HMIS, the lead products. This includes HMIS capacity building grant and the development of Stella P and Stella M, which we will touch on a little bit later on during our conversation.

16:46 Nastacia: Now a couple things I want folks to take away from these strategies and again, we don't... This is not meant to overwhelm folks. Remember that these strategies are an evolving process, yes? You must start where you are. You must utilize these strategies for feedback, give folks feedback, allow people to push back. If the goals don't represent your projects or your community populations, there's some reframing that needs to take place. These strategies were put into place to encourage positive cycles of continuous improvement and data quality. Now, with that being said, I am going to pass this off to Natalie to start to talk about some of the benefits and efforts.

17:43 Natalie: Awesome, thank you so much. Alright, so when we're thinking about this whole thing called HMIS, it's really important to keep in mind that there's a lot of different people that stand to benefit from the system, and a lot of people as well that have to put in effort. And I think what is important to keep in mind is, how out of balance that level of effort and benefit can be. And that's important for me, and I think it's important for all of us because it helps really ground all of us in the shared understanding of... We may feel frustrated, or we may feel overwhelmed by work that we're doing on each map but let's think about the people that are really, really, really putting in a tremendous amount of work day in and day out. What I mean by that is, let's think about the people that are actually homeless that we are asking for all of this information, and that we are asking them to share it with someone that they may not know, share it with someone that they may have just met and oftentimes being asked to share this information for HMIS over and over again.

18:49 Natalie: I often think of when we go to the doctor's office. And we're sitting there and we're filling out a form. After a while, it's sort of like, "Wait a minute, didn't I answer this question already or aren't you asking me the same thing in just a slightly different way?" It gets old fast. And think about trying to do that when you're actually in crisis, when you're actually in homelessness and that's... It's a lot to ask of people. And oftentimes that effort, all that effort of sharing that information and sharing of yourself is not met with an immediate benefit. It's not like we're asking folks to share this information and then, great, now you have housing. It is unfortunately, not an immediate benefit in that sense or really arguably any benefit. What are they benefiting from sharing that information?

19:42 Natalie: At the policy level though or at the political and advocacy level, those are the [19:47] _____. We stand to reap a lot of benefits because we can use this information to say why we need funding for programs. We can use this information to say, "Look how great my program is, look at the outcomes we're achieving." But we're not the ones collecting the data, we're not the ones being asked for that information. We're the ones often being able to see those immediate benefits.

20:09 Natalie: And then last but not least, let's not forget about case managers, social workers, people that are working day-in and day-out, with people that are homeless. They're the ones that actually have to ask for that information, and that's not easy to do, especially if you're in that job normally as a case manager, because you really care about people, and you really wanna make a positive difference not because you're like "Ooh data. Let me think of a way to collect more

information." So that's just important stuff to keep in mind.

20:36 Natalie: So a little bit more broadly let's talk for few minutes about more specifically, what some of those benefits for various stakeholders can be. So why is HMIS worth it? Even with those frustrations, even with those challenges in mind, 'cause they are there. We don't wanna gloss over them. There's still a lot that we can... All of us, can stand to get from HMIS. So for again, for maybe for system-level folks like policy makers, advocates, elected officials, people that are trying to help guide decision making around homelessness, it can help understand gaps in services. It can help understand the need. So, especially I mentioned earlier, those point-in-time or those one-day counts that often happen, those are great, but they're just a snapshot. And so if we're using HMIS for collecting a lot more information over time, and we're able to really, really articulate in the depth of the need in quite an important way.

21:33 Natalie: And then, also, it's really helpful for policy makers and for system-level folks to use data from HMIS to understand gaps in systems. So where are the resources needed, who are they needed for, are there particular people that are being hurt by the systems the way that they're designed? How do we need to shift course? That's all stuff that data can pose from HMIS that we may not know otherwise.

21:58 Natalie: Agency directors or project managers. They're often really charged with funding their programs, and helping ensure that their programs have enough funding, which is really hard to do. And if you have data, if you're armed with data from HMIS, to really describe the performance of your project, the outcomes, that can be helpful for writing grants, it can be helpful for advocating with policy makers. Again, get more funding for the programs that we need.

22:28 Natalie: And then for case managers or social workers, folks that are actually asking that information of people, it's really... HMIS can be a powerful tool because it can help people see changes in clients over time. So if you're in a community where there's data sharing going on, you may have an opportunity to actually see where someone started in the local homeless system, and where they are now, whether or not they've gone in and out of homelessness over time. Some communities, again, with that data sharing can do things like share documentation, or share information so that hopefully you can avoid having to ask people the same questions over and over again. So that's probably the biggest benefit is that information sharing that can happen for case managers.

23:12 Natalie: And lastly, for folks that are experiencing homelessness in terms of HMIS, ideally HMIS will lead to helping connect people to benefits, helping connect them to referrals to other supports that they might need if that's the case, and helping especially in shared database environments, helping connect the case managers all working with the client. Again, sort of avoid that duplication of asking the same information over and over again. You're collecting that data in HMIS and you're sharing it. Then ideally, you can just say "Oh, Joe, I see that you were at another agency last week and I've got all your information, that's great. I'm just gonna confirm a couple of things and move on." And that's a much less stressful process, ideally for clients. So, that's one potential benefit of course for HMIS.

24:04 Natalie: Alright, so now we're gonna talk a little bit about governance. And I do absolutely recognize this is a lot of information that we're trying to get through, so please feel free to pause if you need to and come back to it. This is a lot to take in and we wanna make sure you can retain it

and find it useful in your day-to-day. So why governance? Why are we talking about governance? The primary reason is that this, HMIS, is all locally administered. So you have the Federal Directive to set up the system. But then HUD says, "Okay, now it's up to you guys to figure it out." So figure out what software you wanna use, figure out who's gonna staff this work day-in and day-out, and figure out those roles and responsibilities.

24:53 Natalie: And the one point that I really like to hone in on here in terms of governance for HMIS, is really that unless it's written down in an agreement, don't count on it being understood consistently. So, that's why when we're talking about governance, we're doing things like thinking about what sorts of agreements do you need to have in place, what sorts of documentation of roles and responsibilities do you need to account for? Those are the sorts of work that you'll do in this space for governance. This little chart is an attempt to just visually represent what some of the hierarchy looks like, or who all those entities are that are involved in governance and involved in HMIS.

25:37 Natalie: So at the top, we've got the Continuum of Care. And the reason why the CoC is at the top is because ultimately that Continuum of Care is responsible for HMIS. HUD says "Okay, CoCs, it's incumbent upon you to make these decisions, select the software, select the HMIS lead." So they really hold that authority and then of course they can delegate it to like in HMIS, or like a data committee. But they have to figure out how they're gonna delegate it, and they have to write it down. They have to write down how they've designated that responsibility. [26:09] ____ I didn't meet that in orange. We've got two entities, an HMIS lead agency and an HMIS software provider, or has been referred to as the HMIS vendor. That CoC, they decide, they select both the HMIS lead agency and the HMIS vendor. There are dozens of HMIS lead agencies out there if not hundreds. There are tons of software out there, so it is a big decision to make and it's one that has to be locally made.

26:39 Natalie: Then there's that little arrow going across. Oh, I did it right the first time, nope, I didn't. [laughter] HMIS lead agency across the vendor, and that signifies that that lead agency, they have a relationship contractually with the vendor. So the HMIS lead agency, they get funding from HUD to actually do all of this work of managing the HMIS. And one eligible portion of that funding is to pay for the software, 'cause somebody's gotta buy the licenses, somebody's gotta have a relationship with the vendor. So that's where that HMIS lead and the software provider relationship comes into play. And then lastly, down in gray we've got the contributory HMIS organizations. So in English that means the agencies that are actually using HMIS: Who's logging in, who's entering data, who's trying to run reports. And that HMIS lead agency, they're the entity that really has to have that relationship documented with those participating agencies.

27:40 Natalie: Okay, I'm just gonna go over a few more slides to detail those different roles and then we will turn over to our next section, it's gonna be on data collection. Again, that CoC, they're ultimately responsible for HMIS. So please, don't let yourself be in a situation where your Continuum of Care may say, "Okay, we have a HMIS lead agency, we'll let them handle HMIS." No, no, no, no, no. The HMIS lead agency will definitely handle the day-to-day but that Continuum of Care, they need to know what HMIS is, they need to look at data, they need to approve policies, they need to care about HMIS. Because if they don't, that lack of buy-in at the continuum level that's gonna triple down. If community leadership doesn't see a value in the system, the agencies won't see a value in the system and it's gonna make your job if you're an HMIS lead all the harder.

28:38 Natalie: So focus on certainly fostering that relationship between the technical folks, maybe your HMIS lead folks, and your Continuum of Care, so that they don't see this as a box that they have to check off or something that they have to do, but really work with them to try to understand, what would they want in an ideal HMIS? What do they want from their data that they can't get right now? How can this be useful to them? So think back to those benefits that we were just describing and ways that you can work with the CoC to help them see what some of those potential benefits are and really get them invested in the system. It's also important, again, to make sure that the CoC is taking stock of compliance, so they should be reviewing any policies and procedures, and they should be making sure that all those agencies are participating in HMIS that have.

29:33 Natalie: Okay. HMIS lead agency, so these are often folks that get the funding. Somehow they're the only eligible agency, once again they've been selected by the CoC. They're the only eligible agency to actually get a HUD HMIS grant. You can't just give that to anyone. It has to be who the CoC says is the HMIS lead. And they get to do a lot of the really, really hard work because they have the tough job of making HMIS seem fun and engaging and useful. They have to do training on HMIS. They have to work with the vendor to make sure that the system's working properly. They have to write those policies and procedures usually. And then they have to go and try to help them monitor for compliance, which is a really tough job to do. Because you're often, again, working in this crisis situation with folks where they understandably so, have their focus on ending people's homelessness and then you have to try to create space for, "Okay, let's talk about this database, and let's work together to make this database useful in terms of HMIS."

30:35 Natalie: So it's really important that that HMIS lead agency is strong, that they have a clear, again, sort of documentation with the CoC about what the CoC expects of them. One example of that is, does the Continuum expect that lead agency to run reports for them? Does the CoC expect the HMIS lead agency to staff a certain committee? Those are all things you wanna think through and you wanna write down in an agreement which that [31:04] ____.

31:07 Natalie: Software provider or vendor. They have the unenviable job of actually making that HMIS software work. And what I mean by that is that they have to program the software, they have to program any changes in the software that are needed, they have to make sure data is coming out of the system in compliance with all the federal partner requirements, and they have to do that in an environment where sometimes those things are changing pretty quickly. So, one example is that like right now of course we're in the midst of a pandemic and let's say that a community decides, "Hey, we really want some data on COVID-19, can you help us figure out how to collect that data?" Those are vendors have to come in and say, "Okay we can add a data on and... Or I'm sorry, we can't, this is all we have." So those are the types of conversations and decisions that HMIS vendors are often involved in. And again, they'll have that contract directly with that HMIS lead agencies to really hone in on what are the expectations for things like response time, or for programming changes, like the one I just described. Is your vendor in a spot where they're like, "I'm sorry, we can't do that." Or, "We can do that, but here's what it'll cost you." Those are the sorts of things that you can go through.

32:19 Natalie: And there's another session from NHSDC that it should be posted to the website, right now, that goes in great depth about contract management. That's a really challenging topic. So, you please look there for more guidance. Last slide here and then we're gonna move on to the next section, which is the participating project role. So the agencies that are actually using the system. They have to collect the data, they have to enter it into HMIS, they have to make sure that they've

been trained in the software and that they know what they're doing. They have to try to collect the data in a timely way, which is really hard because they're often case managers, social workers, trying to handle a lot. And so it's really important for them to also get the support that they need to help make this job, this part of their job as easy as possible, don't wanna add a burden to them.

33:10 Natalie: Okay, I think there's a few slides in this, and then I'm gonna turn things back over to Nastacia. So data collection, HMIS data collection. So, what the heck goes into an HMIS? What data do we collect? The short answer is a lot of data can go into HMIS. So I feel like we can talk for a whole other hour, but we won't about HMIS data collection. There's a lot there. There's a Data Standards Manual, it's well over 100 pages, but it's very searchable which is good, but don't feel pressured to memorize it 'cause none of us have, I promise you. And that data collection manual goes over all the... Every single data on it in detail. It says, "When we say collect date of birth, this is what the format it needs to be in, this is when it's collected, this is how it's updated. These are the clients." It's got all the details are there in that Data Standards Manual.

34:03 Natalie: Each federal partner that's participating in HMIS, so the ones that Nastacia talked to you earlier, like the VA and SAMHSA. They all have their own unique HMIS manual, which is like a supplement to this larger manual. Where they say, "Are there programs? Okay, here's the basic guidance in the data standards manual, here's what you need to do for your project." So additional data elements or things that you need to keep in mind. Speaking of history, there was a wonderful period of time in HMIS of about 10 years, where we had no changes to the data standards. So like 2000 and..., It wasn't 10 years, it felt like that. It was 2004 to 2009, we had nothing. That's five years. My math was not good. We had five wonderful years of no data standard changes. HUD says, "Here's the data standard," and that was it, and it was great.

34:57 Natalie: And since then we have had data standard changes almost every year, which has been no fun for anyone. HUD is absolutely included and it's been challenging. But we're in a place now where HUD and the federal partners are making a ton of effort to just limit those data standards changes to once every two years, so that's what we're all working towards, and hopefully that helps to staying stable. There's a great tool that I encourage you all to look for, and it's called the HMIS Data Standards Interactive Tool. That's what you need to Google to find it, and it is very searchable, it's very clickable. So let's say that you just wanna know what the VA requirements are for HMIS. You just find the VA on the screen and you go right there. So definitely encourage you to use that as a part of that technical assistance or TA efforts to try support you all in navigating this.

35:49 Natalie: And then very, very briefly, here are the five types of data elements. So thankfully, we are not gonna read through all the data elements 'cause that would take way too long and be really really boring. We're just gonna talk about the types of data elements. We've got project descriptors. Those are not client-specific, those are about the project, and they describe the project. They say "What's the project name? What Continuum of Care is the project serving? Are there particular target populations for the project? What's the size of the project?" They have 100 beds, they have 10 beds." Those are the project descriptors. You ideally as the HMIS lead agency collect them one time when you're setting up the project and then update them as needed as the project.

36:31 Natalie: Universal data elements, so UDEs 'cause we like our acronyms. UDEs are all the data elements that have to be collected on every single person [36:41] ____ So, it's identifiers like, what's your full name, what's your date of birth, what's your social security, what's your gender what's your race and ethnicity? These are all, especially those first few about names, social and date

of birth are super, super important because they help de-identify or deduplicate people in an HMIS. So let's just use myself as an example, let's say I went to a project and the person I was working with entered me into HMIS as Natalie. That's great, they put that down as my first name, they put in my date of birth and my social. Let's say I go to another agency and they used my nick name, which is Nat. They put me in as Nat Matthews. Well, if you didn't have my date of birth and my social as well, you wouldn't be able on the back end to say, "That sounds like the same person, I'm gonna flag this as a duplicate record." So that's why we need UDEs.

37:34 Natalie: Last but not least, we've got program-specific data elements, which are a little more depth about a client situation, so things like specific type of disability that they may have if they have one, income non-cash benefits, things like that. So things that really just help provide them with the services that they need. Federal partner data elements are ones that are unique to a federal partner as it was just described. So VA-specific or PATH-specific. And then metadata elements, this is data about data. So what I mean by that is when you enter something into HMIS, it timestamps it. So it says, "Okay it's 03:32 PM, and that's when I entered this into HMIS." And it timestamps it so that you can know when the data was collected. That's what you mean by metadata.

38:26 Natalie: Okay. I'm gonna catch my breath and I'm gonna turn things back over to Nastacia for a final section.

38:33 Nastacia: Perfect, and we encourage breaks. So any time press pause. Now, let's talk a little bit about HMIS reporting. We're gonna touch on the reporting requirements by federal partners, we're gonna talk a little bit about system-level reporting and then we'll also get into the importance of data quality as you will hear a lot as we're going through HMIS, data quality is so important. And so that's why you'll continue to hear it from us and probably your own folks within your local jurisdiction.

39:14 Nastacia: So, data in and data out. It's crucial that all of the data that is being asked to be collected in HMIS is being leveraged for some sort of reporting. And so if that's not the case, guys, then you are ultimately running a risk of losing one, user buy-in for your HMIS system, and two, this results in poor data quality, which is not good. You wanna make sure that you can stand by your data, and that you can own your data. And having poor data quality, it's just not the case.

39:54 Nastacia: The universal data element will be the foundation of your client records, as well as how you identify demographic information, and then those trends within that information. So, program-specific data elements will be critical for understanding how client information on income, employment, disability and then the connections to resources, change over time.

[pause]

40:30 Nastacia: All right, so types of reporting. So, there's two levels to this, folks. There are two basic types of reporting that HMIS can be leveraged for. So we're talking about system-level reporting and project-level reporting. All right, so what's the difference? So at the system-level reporting, your primary reports are the SPM, system performance measures, and the LSA. The LSA is used for the AHAR and Stella report. You will also start to hear about the Stella report and the AHAR report as the more you get into your HMIS work and more specifically reporting.

41:16 Nastacia: Two, project level. So there's several annual reports that are due to HUD and the

federal partners that are used to understand your project performance. So this includes your CAPER, this also include your APR, along with other reporting. If you haven't already met Stella, allow me to introduce you to Stella. So, Stella is a strategy and analysis tool that helps CoCs understand how their systems are performing. And it's in place to model a optimized system that fully addresses homelessness within your local network. So this tool, the Stella tool, is available to all CoCs through a system called HDX 2.0. And then you need to know that Stella has two modules. So they have a Stella P and they have a Stella M. Okay? Seems like a little much, right? But just stick with me.

42:32 Nastacia: So Stella P, P for Performance. So, it relies on dynamic visuals of CoC status to illustrate how households move through the system and highlight outcome disparities within that system. Stella P helps your CoCs better gauge their progress towards preventing and ending homelessness. And it helps the focus on that planning and improvement piece to help in your crisis response systems. Now, the second, Stella M, M for Modeling. So Stella M assists your Continuum of Care to explore how resource and investment decisions amplify your system's capacity. So Stella M, it starts with homeless needs and performance goals. It helps the community transform those needs and it also informs the resource and investment decisions. Now, I believe that Stella M is still in production and not yet available, but it's okay because now you know it's coming out and now you have a snapshot of what Stella M and Stella P look like.

43:53 Nastacia: Natalie and I really appreciate you all for joining us today. If you have any questions, please follow up with HUD AAQ. Other than that, we hope that you all enjoy your day. Thank you.