

HUD Standards for Success

Putting It Together: Data Collection and Reporting Using inForm

Virtual Conference

August 23, 2017

Today's Presenter

D. Rob Haley PhD, MBA, MHS
Co-Founder and Executive
Vice President
StrategyGen



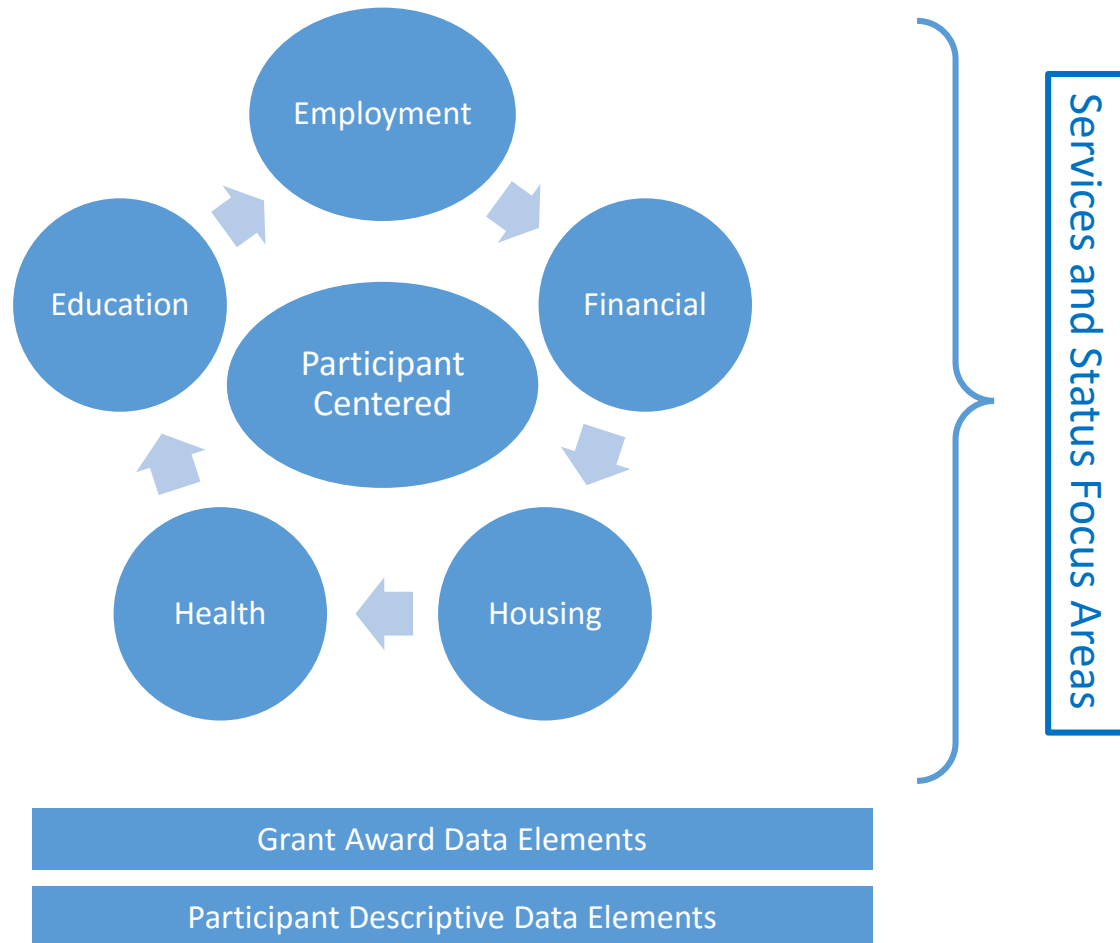
Objectives of Session

1. Provide an integrated view of activities to collect and report data to HUD
2. Deepen understanding of inForm tool
3. Answer questions

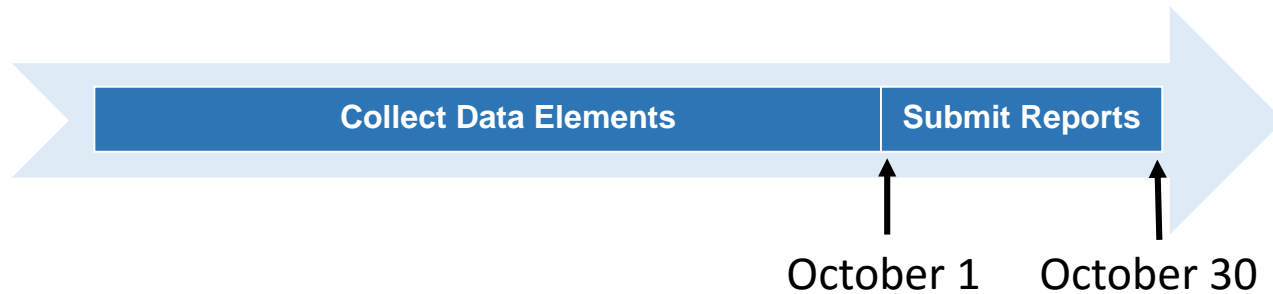
Background

Previous Virtual Conferences Focused on Data Elements

Focus Areas for Participant Self Sufficiency



Data Collection and Reporting



Training regarding inForm Tool



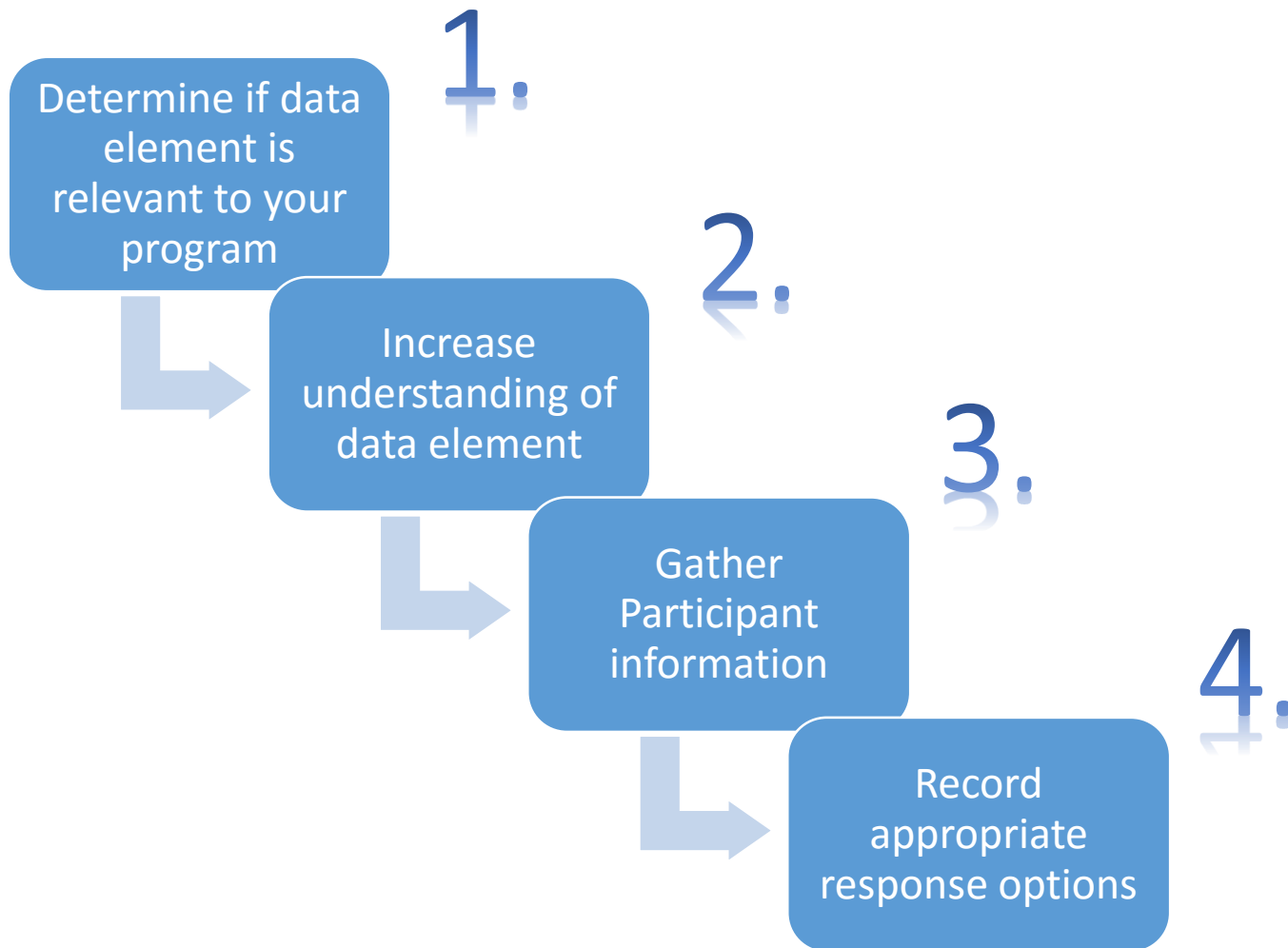
Participant Record-level (PRL) Report: Grantee Actions in inForm

U.S. Department of Housing and Urban Development (HUD)

July, 2017

Data Collection and Reporting

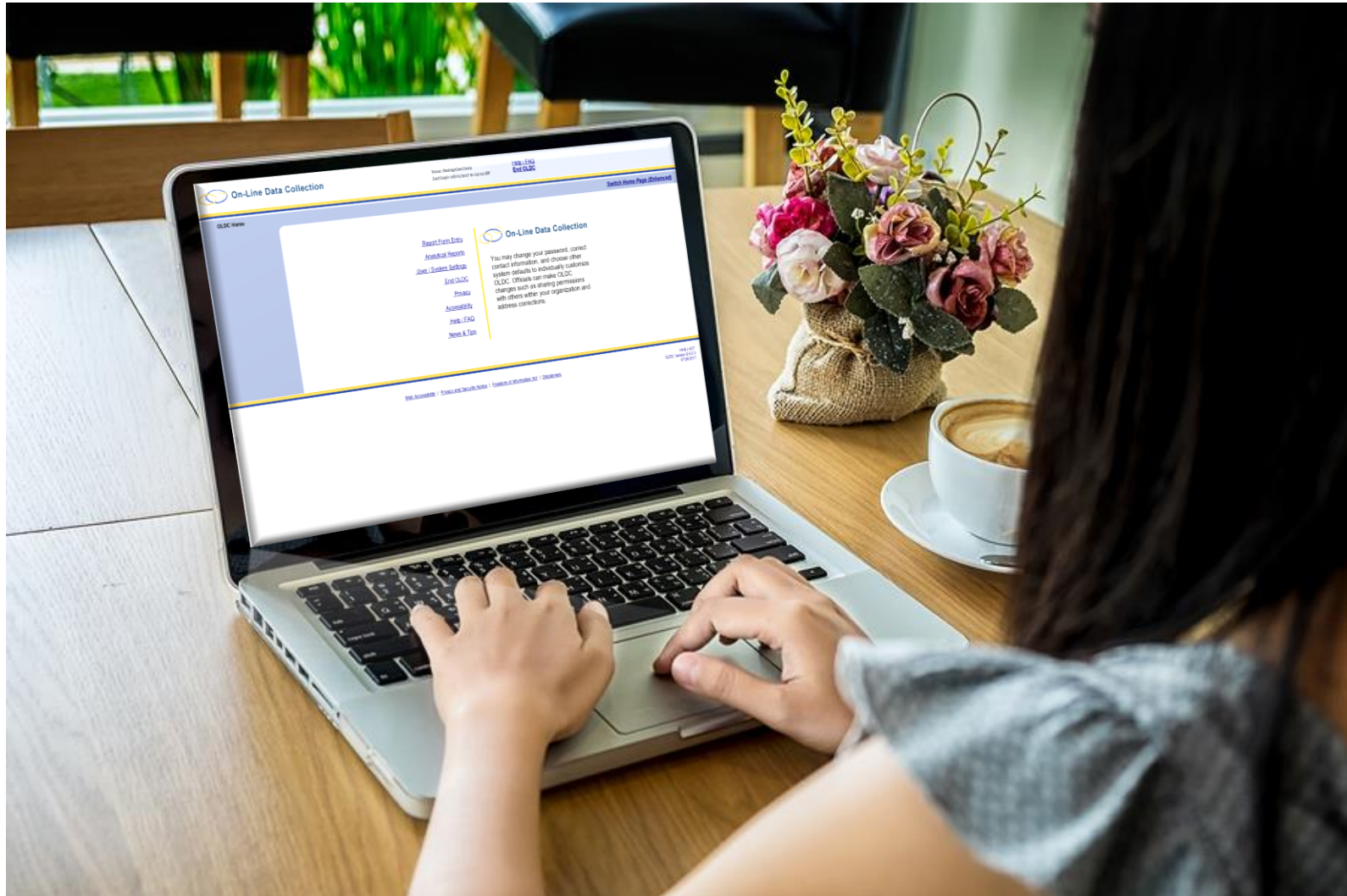
Collecting Data



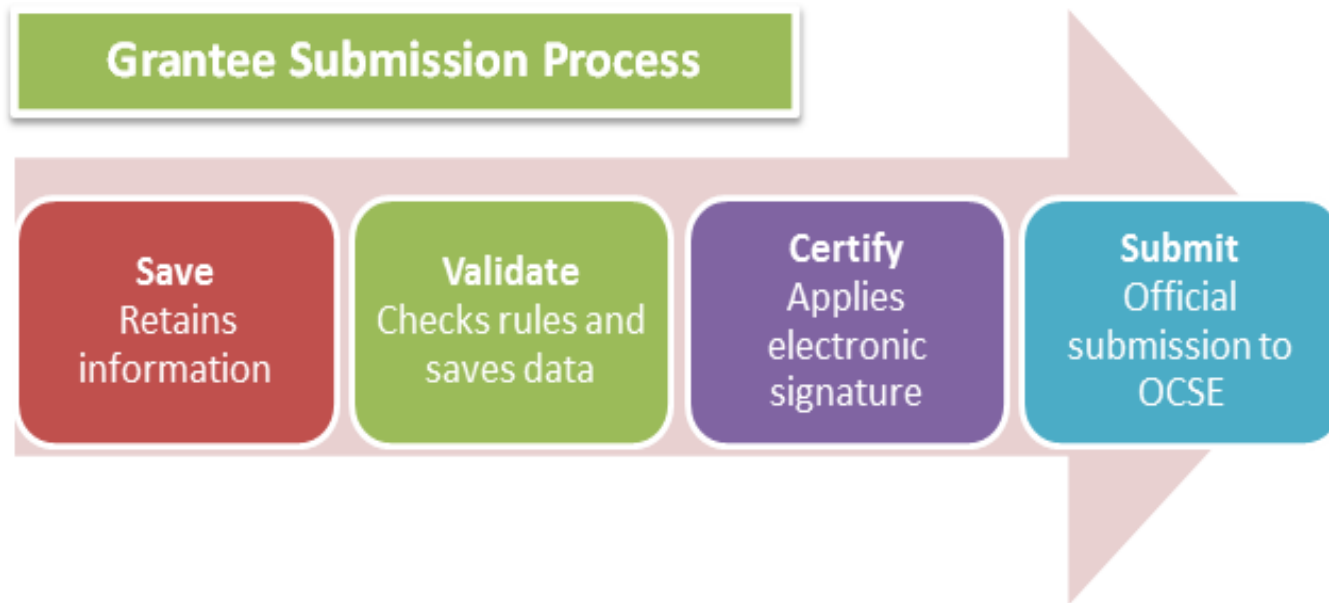
Preparing for Reporting

- What is the identifying information for my program?
- Who are the Participants in my HUD program?
- What is descriptive information for each Participant?
- With whom have I talked?
- What is the status or situation of each Participant?
- Who received what services?
- Did the Participant's status change?

Using the inForm Tool

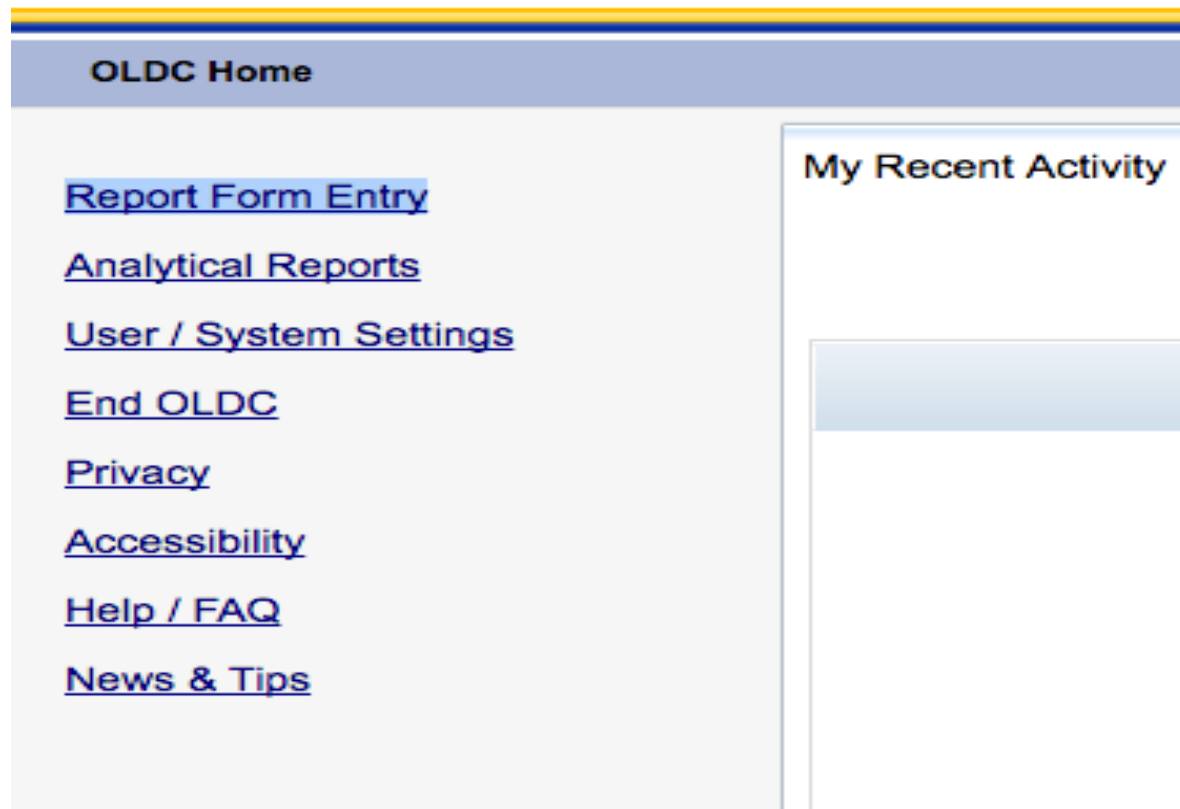


Grantee Submission Process



Source: Grant Solutions

Using the inForm Tool



Form Selection

Form Selection

Please use the drop-down lists below to make selections. Steps must be completed in order.

Step 1: Program Name: Resident Opportunity Self-Sufficiency (ROSS) Service Coordinat ▾

Step 2: Grantee Name: AZ [866000266] (2016-----) City of Tucson ▾

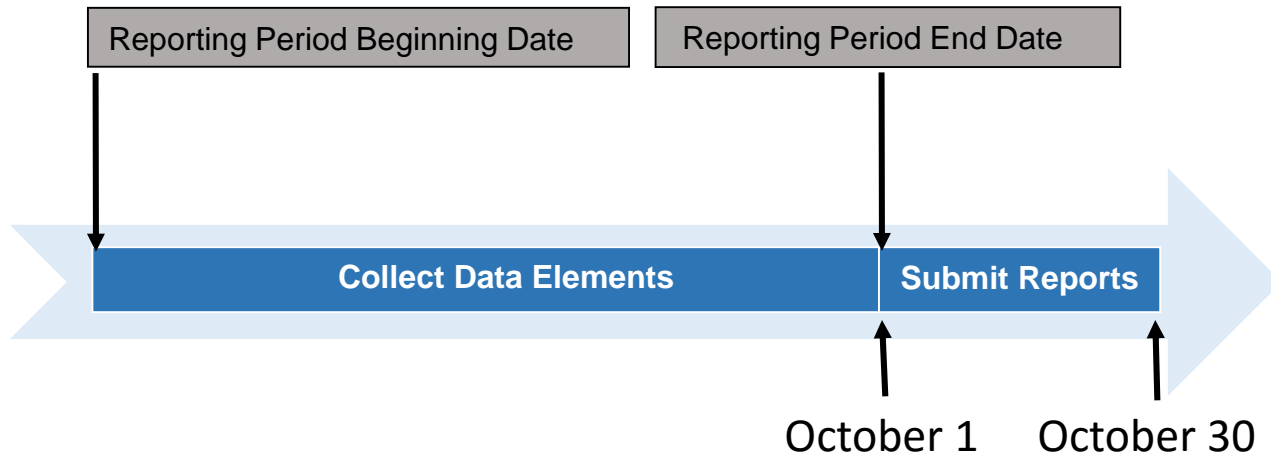
Step 3: Report Name: Standards for Success Annual Report (HUD - PRL) ▾

Step 4: Funding / Grant Period: 10/01/2016 - 09/30/2017 ROSS0 (ROSS171075) ▾

Step 5: Report Period:

	Reporting Period	Type	Report Status
<input checked="" type="radio"/>	10/01/2016 - 09/30/2017	Annual	Initialized

Report Period



Form Selection (continued)

Form Selection

Please use the drop-down lists below to make selections. Steps must be completed in order.

Step 1: Program Name: Resident Opportunity Self-Sufficiency (ROSS) Service Coordinat ▾

Step 2: Grantee Name: AZ [866000266] (2016-----) City of Tucson ▾

Step 3: Report Name: Standards for Success Annual Report (HUD - PRL) ▾

Step 4: Funding / Grant Period: 10/01/2016 - 09/30/2017 ROSS0 (ROSS171075) ▾

Step 5: Report Period:

	Reporting Period	Type	Report Status
<input checked="" type="radio"/>	10/01/2016 - 09/30/2017	Annual	Initialized

Step 6:

Select Action:

Select Action

New / Edit / Revise Report

View / Print / Status / Approve Report

Print Latest Version (HTML)

View Latest Report

Select Action ▾

Enter

Reports Section

[OLDC Home](#)
[Form Selection](#)
[Report Sections](#)
[Report Form Status](#)

Report Sections

Program Name: Resident Opportunity Self-Sufficiency (ROSS) Service Coordinators
Grantee Name: City of Tucson
Report Name: HUD-PRL Report
Funding/Grant Period: 10/01/2016 - 09/30/2017 ROSS0 (ROSS171075)
Report Period: 10/01/2016 - 09/30/2017

This table displays the sections of the report form and the status of each. Return to this screen to Validate, Certify, or Submit.

Selections in the dropdown lists may include:

- Create Section - Indicated by an asterisk (*), copies that section and creates a new blank section.
- Clear Section Data - Deletes all data saved for that section.
- Delete Section - Permanently deletes that section and data.
- Edit Section - Opens the form section in a data-entry version.
- Print Section - Opens a new browser window with the report in a print-friendly version.

[View/Add Attachments](#)
[Validate](#)
[Print Full Report](#)

<u>Section Name:</u>	<u>Perform Action:</u>	<u>Section Status:</u>
Cover Page	Select Action: <input type="button" value="Go"/>	Initialized
* Household Identifier 0	Select Action: <input type="button" value="Go"/>	Initialized

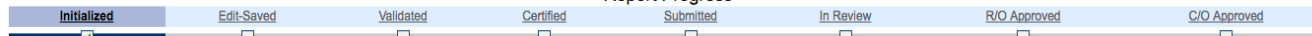
[View/Add Attachments](#)
[Validate](#)
[Print Full Report](#)

Cover Page and Household Identifier

[Save](#) [View/Add Attachments](#) [Validate](#) [Next Section](#)

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management				OMB APPROVED Control No: 2501-0034 Expires 08/31/2019
Participant Record-level Report (HUD - PRL) Cover Page				
1. Federal Agency and Organizational Element to Which Report is Submitted: The Department of Housing and Urban Development		2. Federal Grant(s) or Other Identifying Number(s) by Federal Agency(ies): ROSS171075		
3. Recipient Organization: City of Tucson		4a. DUNS Number: 072450869		
Address Line 1 255 W Alameda St		4b. Catalog of Federal Domestic Assistance Number (CFDA) <input style="width: 100%;" type="text"/>		
Address Line 2 Address Line 3				
City Tucson	State AZ	Zip Code 85701	Zip Ext. 1303	
8a. Project/Grant Period Start Date: 02/01/2017	8b. Project/Grant Period End Date: 01/31/2020	8c. Report End Date: 09/30/2017		
10. Comments (attach additional sheets if necessary): <input style="width: 100%;" type="text"/>				

Report Progress



[Previous Section](#) [Save](#) [View/Add Attachments](#) [Validate](#)


Household Identifier 0

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management				OMB APPROVED Control No: 2501-0034 Expires 08/31/2019
Participant Record-level Report (HUD - PRL)				
Household Identifier <input style="width: 100%;" type="text" value="1234hg17"/>		Person Identifier <input style="width: 100%;" type="text"/>		Age <input style="width: 50px;" type="text"/>
Data Collection Date <input style="width: 100%;" type="text"/>		Intake Date <input style="width: 100%;" type="text"/>		Participant Status Code <input style="width: 100%;" type="text"/>
1. Gender Code	Indicator Number	Response Options		
2. Ethnicity Code	N/A	Select <input style="width: 100%;" type="text"/>		
3. Race Code	N/A	Select <input style="width: 100%;" type="text"/>		
4. Head of Household Code	N/A	Select <input style="width: 100%;" type="text"/>		
5. Residence Census Tract	N/A	<input style="width: 100%;" type="text"/> Information Not Collected <input type="checkbox"/>		
6. Veteran Status Code	N/A	Select <input style="width: 100%;" type="text"/>		
7. Years in Subsidized Housing Number	N/A	<input style="width: 100%;" type="text"/> Information Not Collected <input type="checkbox"/>		
8. Disability Status Code	N/A	Select <input style="width: 100%;" type="text"/>		

Cover Page Section

Catalog of Federal Domestic Assistance Number (CFDA)

[Save](#)
[View/Add Attachments](#)
[Validate](#)
[Next Section](#)


U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management		OMB APPROVED Control No: 2501-0034 Expires 08/31/2019	
Participant Record-level Report (HUD - PRL) Cover Page			
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Address Line 1 255 W Alameda St		4b. Catalog of Federal Domestic Assistance Number (CFDA) <input type="text"/>	
Address Line 2			
Address Line 3			
City Tucson	State AZ	Zip Code 85701	Zip Ext. 1303
8a. Project/Grant Period Start Date: 02/01/2017	8b. Project/Grant Period End Date: 01/31/2020	8c. Report End Date: 09/30/2017	
10. Comments (attach additional sheets if necessary): 			
<input type="text"/>			

Cover Page – Grant Award Information

1. DATE ISSUED MM/DD/YYYY 02/07/2017	2. CFDA NO. 14.870	3. ASSISTANCE TYPE Project Grant	The Department of Housing and Urban Development THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT 451 7th Street S.W., Washington, DC, DC 20410 NOTICE OF AWARD																		
1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded																					
4. GRANT NO. ROSS170001-01-00 Formerly	5. ACTION TYPE New																				
6. PROJECT PERIOD From MM/DD/YYYY 02/01/2017	Through MM/DD/YYYY 01/31/2020																				
7. BUDGET PERIOD From MM/DD/YYYY 02/01/2017	Through MM/DD/YYYY 01/31/2020																				
8. TITLE OF PROJECT (OR PROGRAM) CHA's 2016 ROSS SC Program																					
9a. GRANTEE NAME AND ADDRESS Smallville County Housing Authority 123 Allen St Smallville, CT XXXXX-XXXX		9b. GRANTEE PROJECT DIRECTOR Mr. John Doe 123 Aspen Street Smallville, CT XXXXX-XXXX Phone: XXX-XXX-XXXX																			
10a. GRANTEE AUTHORIZING OFFICIAL Mr. John Doe 123 Aspen Street Smallville, CT XXXXX-XXXX Phone: XXX-XXX-XXXX		10b. FEDERAL PROJECT OFFICER Mr. John Doe 123 Aspen Street Smallville, CT XXXXX-XXXX Phone: XXX-XXX-XXXX																			
ALL AMOUNTS ARE SHOWN IN USD																					
11. AWARD COMPUTATION FOR GRANT <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. Amount of HUD Financial Assistance</td> <td style="width: 20%; text-align: right;">241,476.00</td> </tr> <tr> <td>b. Less Unobligated Balance From Prior Budget Periods</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>c. Less Cumulative Prior Award(s) This Budget Period</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td> <td style="text-align: right; border: 1px solid black;">241,476.00</td> </tr> </table>		a. Amount of HUD Financial Assistance	241,476.00	b. Less Unobligated Balance From Prior Budget Periods	0.00	c. Less Cumulative Prior Award(s) This Budget Period	0.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	241,476.00	14. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F, OR 45 CFR 92.25, SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: <table style="width: 100%; border-collapse: collapse;"> <tr><td>a.</td><td>DEDUCTION</td></tr> <tr><td>b.</td><td>ADDITIONAL COSTS</td></tr> <tr><td>c.</td><td>MATCHING</td></tr> <tr><td>d.</td><td>OTHER RESEARCH (Add / Deduct Option)</td></tr> <tr><td>e.</td><td>OTHER (See REMARKS)</td></tr> </table>		a.	DEDUCTION	b.	ADDITIONAL COSTS	c.	MATCHING	d.	OTHER RESEARCH (Add / Deduct Option)	e.	OTHER (See REMARKS)
a. Amount of HUD Financial Assistance	241,476.00																				
b. Less Unobligated Balance From Prior Budget Periods	0.00																				
c. Less Cumulative Prior Award(s) This Budget Period	0.00																				
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	241,476.00																				
a.	DEDUCTION																				
b.	ADDITIONAL COSTS																				
c.	MATCHING																				
d.	OTHER RESEARCH (Add / Deduct Option)																				
e.	OTHER (See REMARKS)																				
12. Total Federal Funds Awarded to Date for Project Period 241,476.00		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; text-align: center; line-height: 40px; font-weight: bold;">b</div>																			
13. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):		15. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, HUD ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: <table style="width: 100%; border-collapse: collapse;"> <tr><td>a.</td><td>The grant program legislation cited above.</td></tr> <tr><td>b.</td><td>The grant program regulations cited above.</td></tr> <tr><td>c.</td><td>This award notice including terms and conditions, if any, noted below under REMARKS.</td></tr> <tr><td>d.</td><td>HUD Grants Policy Statement including addenda in effect as of the beginning date of the budget period.</td></tr> <tr><td>e.</td><td>45 CFR Part 74 or 45 CFR Part 92 as applicable.</td></tr> </table> In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.		a.	The grant program legislation cited above.	b.	The grant program regulations cited above.	c.	This award notice including terms and conditions, if any, noted below under REMARKS.	d.	HUD Grants Policy Statement including addenda in effect as of the beginning date of the budget period.	e.	45 CFR Part 74 or 45 CFR Part 92 as applicable.								
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e.	45 CFR Part 74 or 45 CFR Part 92 as applicable.																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">YEAR</th> <th style="width: 25%;">TOTAL DIRECT COSTS</th> <th style="width: 25%;">YEAR</th> <th style="width: 25%;">TOTAL DIRECT COSTS</th> </tr> </thead> <tbody> <tr> <td>a. 2</td> <td></td> <td>d. 5</td> <td></td> </tr> <tr> <td>b. 3</td> <td></td> <td>e. 6</td> <td></td> </tr> <tr> <td>c. 4</td> <td></td> <td>f. 7</td> <td></td> </tr> </tbody> </table>	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS	a. 2		d. 5		b. 3		e. 6		c. 4		f. 7		REMARKS (Other Terms and Conditions Attached - <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No)				
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS																		
a. 2		d. 5																			
b. 3		e. 6																			
c. 4		f. 7																			

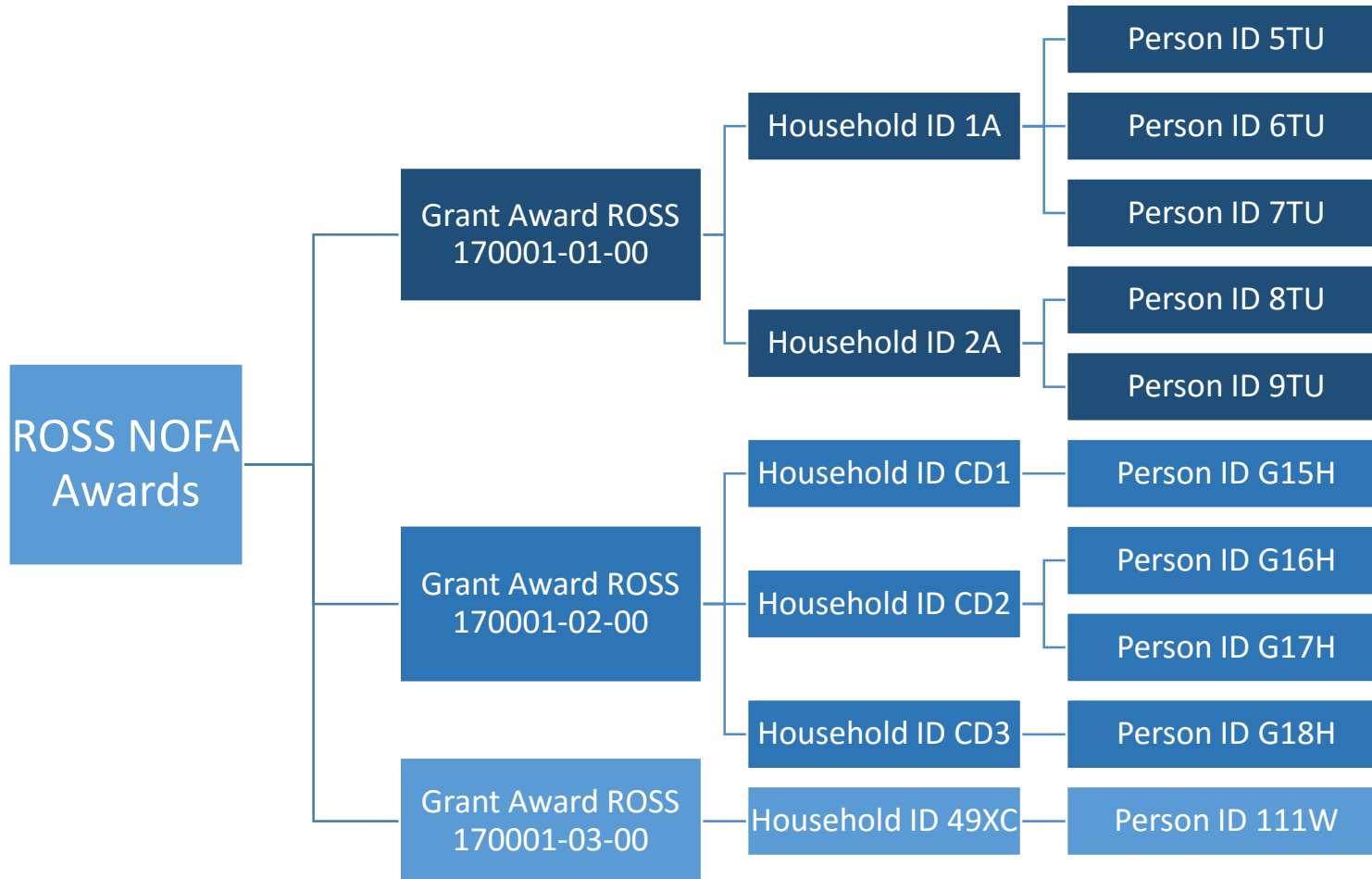
CFDA Number

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[Validate](#)
[Next Section](#)

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management			OMB APPROVED Control No: 2501-0034 Expires 08/31/2019	
Participant Record-level Report (HUD - PRL) Cover Page				
1. Federal Agency and Organizational Element to Which Report is Submitted: The Department of Housing and Urban Development		2. Federal Grant(s) or Other Identifying Number(s) by Federal Agency(ies): ROSS171075		
3. Recipient Organization: City of Tucson		4a. DUNS Number: 072450869		
Address Line 1 255 W Alameda St		4b. Catalog of Federal Domestic Assistance Number (CFDA) <div style="border: 2px solid green; padding: 2px; display: inline-block;">14.870</div>		
Address Line 2				
Address Line 3				
City Tucson	State AZ	Zip Code 85701	Zip Ext. 1303	
8a. Project/Grant Period Start Date: 02/01/2017	8b. Project/Grant Period End Date: 01/31/2020	8c. Report End Date: 09/30/2017		
10. Comments (attach additional sheets if necessary): 				

Household Identifier Section

Household and Person Identifiers Unique within each Grant Award



Household with Multiple Participants

[View/Add Attachments](#) [Validate](#) [Print Full Report](#)

Section Name:	Perform Action:	Section Status:
Cover Page	Select Action: <input type="button" value="Go"/>	Initialized
* Household Identifier 0	Select Action: <input type="button" value="Go"/> Create Section Clear Section Data Edit Section Print Section	Initialized

[View/Add Attachments](#) [Validate](#)

[View/Add Attachments](#) [Validate](#) [Print Full Report](#)

Section Name:	Perform Action:	Section Status:
Cover Page	Select Action: <input type="button" value="Go"/>	Initialized
* Household Identifier 0	Select Action: <input type="button" value="Go"/>	Initialized
* Household Identifier 1	Select Action: <input type="button" value="Go"/>	Initialized
* Household Identifier 2	Select Action: <input type="button" value="Go"/>	Initialized

[View/Add Attachments](#) [Validate](#) [Print Full Report](#)

Household Identifier 0

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management		OMB APPROVED Control No: 2501-0034 Expires 08/31/2019	
Participant Record-level Report (HUD - PRL)			
Household Identifier <input type="text"/>	Person Identifier <input type="text"/>	Age <input type="text"/>	
Data Collection Date <input type="text"/>	Intake Date <input type="text"/>	Participant Status Code <input type="text"/>	
Data Element Name	Indicator Number	Response Options	
1. Gender Code	N/A	<input type="text"/>	
2. Ethnicity Code	N/A	<input type="text"/>	



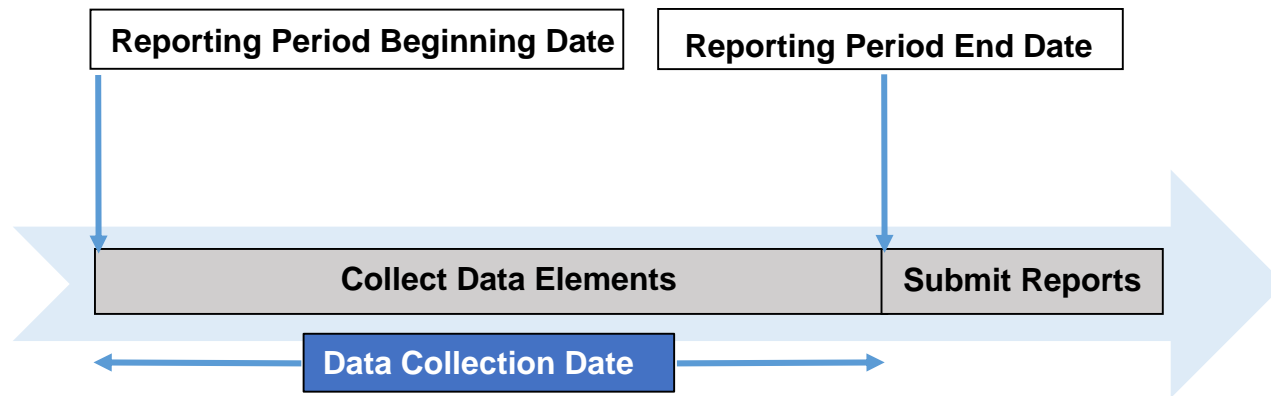
Hypothetical Participant – Gloria

Meet Gloria, a Hypothetical Participant

- Recently turned 65-year-old single female
- Lives in an apartment outside Denver, Colorado
- Self-identifies as Latino
- Actively participates in Program and receives services
- Became employed at the local mall while in the Program

Data Collection Date

Data Collection Date - date when data regarding a Participant was first collected



Data Collection Date

Data Collection Date 4/30/2017

Participant Status Code

Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Previous Section](#)
[Save](#)
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[Validate](#)

Household Identifier 0

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management		OMB APPROVED Control No: 2501-0034 Expires 08/31/2019
Participant Record-level Report (HUD - PRL)		
Household Identifier <input type="text" value="1234hg17"/>	Person Identifier <input type="text"/>	Age <input type="text" value="65"/>
Data Collection Date <input type="text"/>	Intake Date <input type="text" value="4/30/2017"/>	Participant Status Code <input type="text" value="Select"/> <input type="text" value="Participant"/> <input type="text" value="Non-Participant"/>
Data Element Name	Indicator Number	Response Options
1. Gender Code	N/A	<input type="text" value="Select"/>
2. Ethnicity Code	N/A	<input type="text" value="Select"/>
3. Race Code	N/A	<input type="text" value="Select"/>
4. Head of Household Code	N/A	<input type="text" value="Select"/>

Ethnicity Code

Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Data Element Name	Indicator Number	Response Options
<u>1. Gender Code</u>	N/A	Female
<u>2. Ethnicity Code</u>	N/A	Select Hispanic/Latino Not Hispanic/Latino Individual refused Individual does not know
<u>3. Race Code</u>	N/A	
<u>4. Head of Household Code</u>	N/A	
<u>5. Residence Census Tract</u>	N/A	<input type="text"/> Information Not Collected <input type="checkbox"/>

Race Code

Report Progress

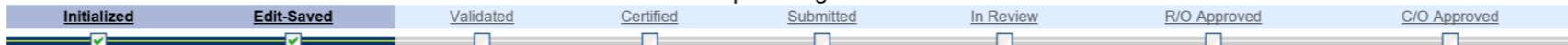
Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>Data Element Name</u>	<u>Indicator Number</u>	
<u>1. Gender Code</u>	N/A	
<u>2. Ethnicity Code</u>	N/A	
<u>3. Race Code</u>	N/A	<div> Select American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Mixed Race Individual refused Individual does not know </div>
<u>4. Head of Household Code</u>	N/A	
<u>5. Residence Census Tract</u>	N/A	

Information Not Collected ☐

Gender Code

Report Progress



U.S. Department of Housing and Urban Development
Participant Record-level Report (PRL)
Office of Strategic Planning and Management

OMB APPROVED
Control No: 2501-0034
Expires 08/31/2019

Participant Record-level Report (HUD - PRL)

Household Identifier	1234hg17	Person Identifier	a	Age	65
Data Collection Date		Intake Date		Participant Status Code	Select

Data Element Name	Indicator Number	ns
1. Gender Code	N/A	
2. Ethnicity Code	N/A	
3. Race Code	N/A	
4. Head of Household Code	N/A	
5. Residence Census Tract	N/A	<input type="text"/> Information Not Collected <input type="checkbox"/>
6. Veteran Status Code	N/A	Select <input type="text"/>
7. Years in Subsidized Housing Number	N/A	<input type="text"/> Information Not Collected <input type="checkbox"/>
8. Disability Status Code	N/A	Select <input type="text"/>
9. Disability Category Code	N/A	Select <input type="text"/>
10. Disability Requires Assistance Code	N/A	Select <input type="text"/>

Head of household has lived in public housing for more than 10 yr ☐

Head of Household Code

Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

U.S. Department of Housing and Urban Development
Participant Record-level Report (PRL)
Office of Strategic Planning and Management

OMB APPROVED
Control No: 2501-0034
Expires 08/31/2019

Participant Record-level Report (HUD - PRL)

Household Identifier	<input type="text" value="1234hg17"/>	Person Identifier	<input type="text" value="a"/>	Age	<input type="text" value="65"/>
Data Collection Date	<input type="text"/>	Intake Date	<input type="text"/>	Participant Status Code	<input type="text" value="Select"/>

Data Element Name	Indicator Number	Response Options
1. Gender Code	N/A	<input type="text" value="Select"/>
2. Ethnicity Code	N/A	<input type="text" value="Select"/>
3. Race Code	N/A	<input type="text" value="Select"/>
4. Head of Household Code	N/A	<div> <input type="text" value="Select"/> <input checked="" type="text" value="Yes"/> <input type="text" value="No"/> <input type="text" value="Information not collected"/> <input type="text" value="Individual refused"/> <input type="text" value="Individual does not know"/> </div>
5. Residence Census Tract	N/A	<input type="text" value="Not Collected"/> <input type="checkbox"/>
6. Veteran Status Code	N/A	<input type="text" value="Information Not Collected"/> <input type="checkbox"/>
7. Years in Subsidized Housing Number	N/A	<input type="text" value=""/>
8. Disability Status Code	N/A	<input type="text" value="Select"/>
9. Disability Category Code	N/A	<input type="text" value="Select"/>
10. Disability Requires Assistance Code	N/A	<input type="text" value="Select"/>

Temporary Assistance to Needy Families (TANF) Code

13. Earned Income Tax Credit Recipient Code	N/A	Select ▼
15. Supplemental Nutrition Assistance Program (SNAP) Code	N/A	Select ▼
16. Temporary Assistance to Needy Families (TANF) Code	N/A	Information not collected ▼
17. Supplemental Security Income (SSI) Code	N/A	Select ▼
18. Social Security Disability Insurance (SSDI) Code	N/A	Select ▼
19. Substance Abuse Treatment Code	N/A	The individual is being treated for subs ▼

Service Start Date and Service End Date

Service Start Date

- Date Participant begins receiving service

Service End Date

- Date the Participant's grant-funded services or benefits were completed or terminated

Service Start and End Date – Applicable Services

- ESL Class Service
- Career Guidance Service
- Self-Directed Job Search Assistance Service
- Work Readiness Assistance Service
- Occupational Skills Training Service
- Job Development Service
- Job Retention Service
- Fair Housing and Civil Rights Assistance Service
- Tax Preparation Service
- Financial Account Creation Service
- Legal Assistance Service
- Financial Education Service
- Pre-Housing Counseling Service
- Post-Housing Counseling Service
- Food and Nutrition Service
- Conflict Resolution Service
- Translation/Interpretation Service
- Housing Retention Service
- Household Skills/Life Skills Service
- Needs Assessment Service
- Service Coordination Service
- Parenting Skills Service
- 3 to 5 Years Childhood Education Service
- High School/GED Preparation Service
- Post-Secondary/College Education Service
- Shelter Placement Service
- Temporary Housing Placement Service
- Permanent Housing Placement Service
- Independent Living Service
- Transportation Assistance Service
- HIV/AIDS Service
- Adult Personal Assistance Service
- Legal Assistance Type Service

Service Start Date and Service End Date

13. Earned Income Tax Credit Recipient Code	N/A	Select	
15. Supplemental Nutrition Assistance Program (SNAP) Code	N/A	Select	
16. Temporary Assistance to Needy Families (TANF) Code	N/A	Select	
17. Supplemental Security Income (SSI) Code	N/A	Select	
18. Social Security Disability Insurance (SSDI) Code	N/A	Select	
19. Substance Abuse Treatment Code	N/A	Select	
21. Activities of Daily Living (ADL) Count	N/A		Information Not Collected <input type="checkbox"/>
22. Instrumental Activities of Daily Living (IADL) Count	N/A		Information Not Collected <input type="checkbox"/>
23. Service Start Date	N/A		Information Not Collected <input type="checkbox"/>
24. Service End Date	N/A		Information Not Collected <input type="checkbox"/>
25. Opportunity Area Census Tract	N/A	Select	
27. Primary Health Care Provider Code	12,13,14	Select	
28. Health Coverage Code	12,13,14	Yes, covered through employer or union (current or former) Yes, purchased insurance from insurance company Medicare Medicaid/Medical Assistance TRICARE or other military health care VA health care Indian Health Service	

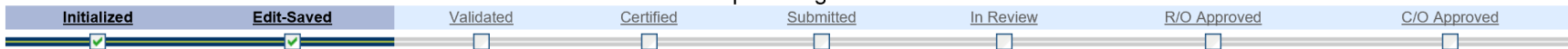
Health Coverage Code

25. Opportunity Area Census Tract	N/A	Select <input type="text"/>
27. Primary Health Care Provider Code	12,13,14	Select <input type="text"/>
28. Health Coverage Code	12,13,14	<div> <div>Yes, covered through employer or union (current or former)</div> <div>Yes, purchased insurance from insurance company</div> <div>Medicare</div> <div>Medicaid/Medical Assistance</div> <div>TRICARE or other military health care</div> <div>VA health care</div> <div>Indian Health Service</div> </div>
29. Medical Examination Status Code	12,13,14	Select <input type="text"/>
30. Highest Education Level Code	8,9,10	Select <input type="text"/>
31. Enrollment in Educational or Vocational Program	8,9,10	Select <input type="text"/>
32. License or Certificate Attainment Code	8,9,10	Select <input type="text"/>
33. Degree Attainment Code	8,9,10	Select <input type="text"/>
34. Employment Status Code	1,2	Select <input type="text"/>
35. Employment Type Status Code	1,2	Select <input type="text"/>
36. Entered Employment Date	1,2	<input type="text"/> <input type="text"/> Information Not Collected <input type="checkbox"/>



Employment Status Code

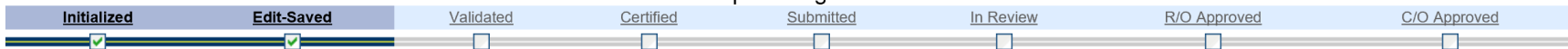
Report Progress



33. Degree Attainment Code	8,9,10	
34. Employment Status Code	1,2	<div> <div>Select</div> <div>Employed</div> <div>Not employed at any time in the last month and actively seeking work</div> <div>Not employed at any time in the last month and not actively seeking work</div> <div>Individual refused</div> <div>Individual does not know</div> <div>N/A</div> <div>Information not collected</div> </div>
35. Employment Type Status Code	1,2	
36. Entered Employment Date	1,2	
37. Occupation Code	1,2	
38. Monthly Paid Earnings Amount	1,2	<div> <div>\$0</div> <div>Information Not Collected <input type="checkbox"/></div> </div>
45. Household Housing Cost Amount	17	<div> <div>\$0</div> <div>Information Not Collected <input type="checkbox"/></div> </div>

Entered Employment Date

Report Progress



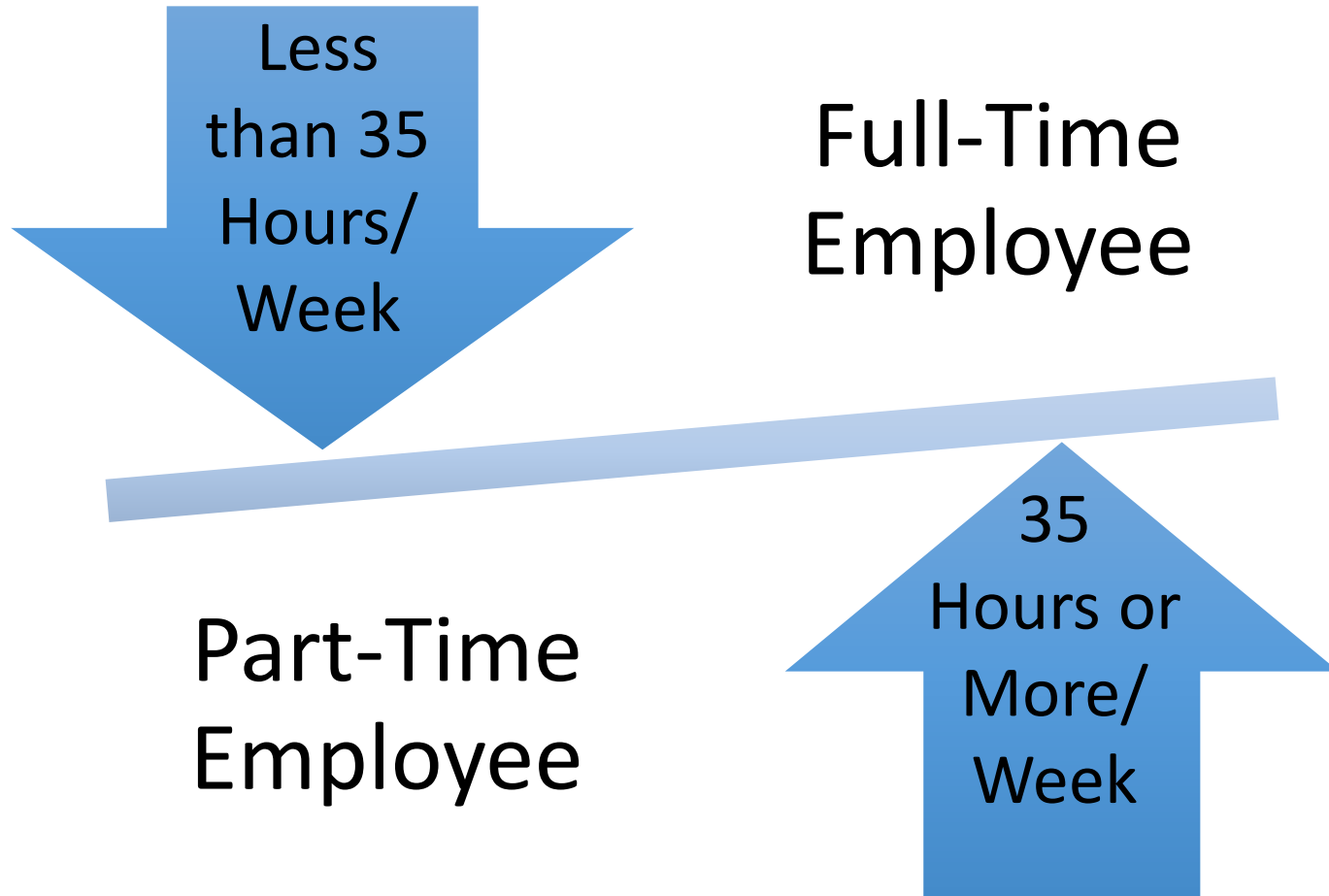
36. Entered Employment Date	1,2	8/1/2017	Information Not Collected <input type="checkbox"/>
37. Occupation Code	1,2		Information Not Collected <input type="checkbox"/>
38. Monthly Paid Earnings Amount	1,2		Information Not Collected <input type="checkbox"/>
45. Household Housing Cost Amount	17		Information Not Collected <input type="checkbox"/>
46. Household Transportation Cost Amount	17		Information Not Collected <input type="checkbox"/>
51. Adult Basic Education Service Code	4,8,9,10		
52. ESL Class Service Code	4		
53. Career Guidance Service Code	1,2,4		
64. Financial Education Service Code	4		
68. Conflict Resolution Service Code	4		

August

S	M	T	W	T	F	S
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	1	2
3	4	5	6	7	8	9

2016
2017
2018

Employment Type Status Code



Employment Type Status Code

Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>32. License or Certificate Attainment Code</u>	8,9,10	Individual does not know ▼	
<u>33. Degree Attainment Code</u>	8,9,10	Individual refused ▼	
<u>34. Employment Status Code</u>	1,2	Select Full-time worker employed in the last month Part-time worker employed in the last month	
<u>35. Employment Type Status Code</u>	1,2	Individual refused	
<u>36. Entered Employment Date</u>	1,2	Individual does not know	Not Collected <input checked="" type="checkbox"/>
<u>37. Occupation Code</u>	1,2	N/A Information not collected	

Monthly Paid Earnings Amount

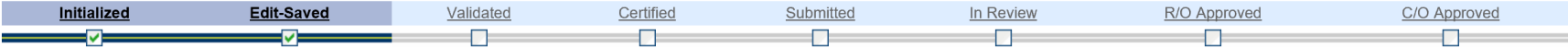
Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>37. Occupation Code</u>	1,2	Information not collected	Information Not Collected <input checked="" type="checkbox"/>
<u>38. Monthly Paid Earnings Amount</u>	1,2	\$ 600 x	Information Not Collected <input checked="" type="checkbox"/>
<u>45. Household Housing Cost Amount</u>	17	\$ 0	Information Not Collected <input checked="" type="checkbox"/>
<u>46. Household Transportation Cost Amount</u>	17	\$ 0	Information Not Collected <input checked="" type="checkbox"/>

Primary Care Provider

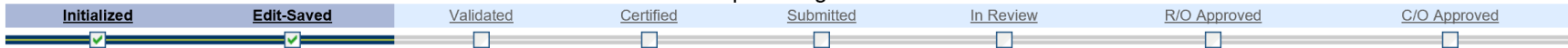
Report Progress



25. Opportunity Area Census Tract	N/A	Yes
27. Primary Health Care Provider Code	12,13,14	Select
28. Health Coverage Code	12,13,14	Yes
		No
		Individual refused
		Individual does not know
		N/A
		Information not collected
		TRICARE or other military health care
		VA health care
		Indian Health Service

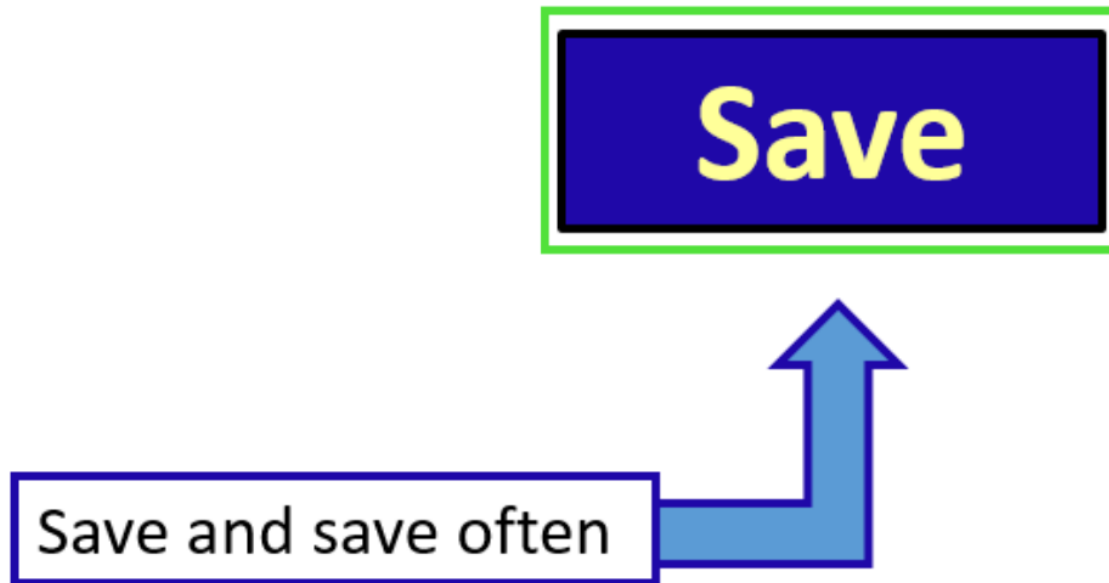
Medical Examination Status Code

Report Progress



		Select	
29. Medical Examination Status Code	12,13,14	Yes	
30. Highest Education Level Code	8,9,10	No	
31. Enrollment in Educational or Vocational Program	8,9,10	Individual refused	
32. License or Certificate Attainment Code	8,9,10	Individual does not know	
		N/A	
		Information not collected	

Saving Information



Validate

Report Progress

Initialized	Edit-Saved	Validated	Certified	Submitted	In Review	R/O Approved	C/O Approved
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Previous Section](#)
[Save](#)
[View/Add Attachments](#)
[Validate](#)

Household Identifier #: 1234hg17 & Personal Identifier #: 123456

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management		OMB APPROVED Control No: 2501-0034 Expires 08/31/2019
Participant Record-level Report (HUD - PRL)		
Household Identifier	1234hg17	Person Identifier
Data Collection Date	7/10/2017	Intake Date
Age	51	
Participant Status Code	Participant	

Data Element Name	Indicator Number	Response Options
1. Gender Code	N/A	Female
2. Ethnicity Code	N/A	Hispanic/Latino
3. Race Code	N/A	Mixed Race
4. Head of Household Code	N/A	Yes
5. Residence Census Tract	N/A	Information Not Collected <input checked="" type="checkbox"/>
6. Veteran Status Code	N/A	No
7. Years in Subsidized Housing Number	N/A	2 Information Not Collected <input type="checkbox"/>
8. Disability Status Code	N/A	N/A

Certify

[Save](#) [View/Add Attachments](#) [Validate](#) [Next Section](#)

U.S. Department of Housing and Urban Development Participant Record-level Report (PRL) Office of Strategic Planning and Management				OMB APPROVED Control No: 2501-0034 Expires 08/31/2019	
Participant Record-level Report (HUD - PRL) Cover Page					
1. Federal Agency and Organizational Element to Which Report is Submitted: The Department of Housing and Urban Development			2. Federal Grant(s) or Other Identifying Number(s) by Federal Agency(ies): ROSS171075		
3. Recipient Organization: City of Tucson			4a. DUNS Number: 072450869		
Address Line 1 255 W Alameda St			4b. Catalog of Federal Domestic Assistance Number (CFDA) <input type="text"/>		
Address Line 2 Address Line 3					
City Tucson	State AZ	Zip Code 85701	Zip Ext. 1303		
8a. Project/Grant Period Start Date: 02/01/2017		8b. Project/Grant Period End Date: 01/31/2020		8c. Report End Date: 09/30/2017	
10. Comments (attach additional sheets if necessary): ☺ <div style="border: 1px solid black; height: 40px; width: 100%;"></div>					
10. Certification: I certify to the best of my knowledge and belief that all information presented in this report is true, correct and complete and constitutes a material representation of fact upon which the Federal government may rely					
11a. Typed or Printed Name and Title of Authorized Certifying Official:			11c. Telephone (area code, number, extension):		
			11d. Email Address:		
11b. Signature of Authorized Certifying Official: Click to Sign			11e. Date Report Submitted (MM/DD/YYYY):		

[Save](#) [View/Add Attachments](#) [Validate](#) [Next Section](#)

Click to Sign

Submit

Program Name: Resident Opportunity Self-Sufficiency (ROSS) Service Coordinators
Grantee Name: City of Tucson
Report Name: HUD-PRL Report
Funding/Grant Period: 10/01/2016 - 09/30/2017 ROSS0 (ROSS171075)
Report Period: 10/01/2016 - 09/30/2017

This screen displays the status of report forms and their revisions, along with attached files. To continue entering report form information, click on 'Grantee Selection'.

[View Attachments](#)
[UnCertify](#)
[Submit](#)
[Print Full Report](#)

<u>Section Name:</u>	<u>Perform Action:</u>	<u>Section Status:</u>
Cover Page	Select Action: <input type="button" value="Go"/>	Certified
Household Identifier #: 1234567a & Personal Identifier #: a	Select Action: <input type="button" value="Go"/>	Certified

[View Attachments](#)
[UnCertify](#)
[Submit](#)
[Print Full Report](#)

When can I change information in the report?

Before submitting

- New/Revise/Edit

After certifying

- Uncertify
- Make edits
- Save, revalidate and recertify

After submitting and before Grantor approval

- Unsubmit
- Make edits
- Save, revalidate, recertify, and resubmit

Pilot Program Dates

Data Collection and Reporting Dates

Date	HOPWA	MFSC and B-b	FY 2016 ROSS
Data Collection Start Date	January 1, 2017	January 1, 2017	February 1, 2017
Data Collection End Date	September 30, 2017	September 30, 2017	September 30, 2017
Data Report Submission Due Date	October 30, 2017	October 30, 2017	October 30, 2017

Report submission due date



Summary

Summary

- The inForm tool and other select tools only present data elements relevant to your Program.
- All Grant Award and Participant Descriptive data elements apply to all grants.
- Collecting and entering data into the inForm tool or other data management system at regular intervals during the year facilitates complete and accurate reporting of information.
- If a Participant's situation changes during the reporting period, record the most recent status of the Participant.
- The inForm tool offers multiple options for changing data in a report.
- The dates for submitting data to HUD for reporting purposes are October 1 – October 30, 2017. The report submission due date is October 30, 2017.

Contact Information for the inForm Tool

For:

- Requests for new inForm accounts
- “How-to” questions regarding steps to use the tool
- Standards for Success general questions and feedback



AskGMO@hud.gov

For:

- Requests for reminders of usernames
- Password resets
- Questions regarding inForm’s technology



help@grantsolutions.gov



**202-401-5282 or
1-866-577-0771**

Summary of Reference Materials

Data Integrity Reference Manuals

Shortcuts

Quick References

Frequently Asked Questions

Fact Sheets

Participant Record-level Information

Virtual Conferences

Computer-based Training

HUD Exchange Website:

<https://www.hudexchange.info/programs/standards-for-success/>

HUD Standards for Success Virtual Conference 8 – Putting It Together: Data Collection and Reporting Using inForm– Speaker's Comments

Page 1: Cover Page

- Welcome to HUD's Standards for Success Pilot Program's Virtual Conference addressing Putting It Together: Data Collection and Reporting Using inForm
- If you are participating in a scheduled virtual conference, I want to provide a few technology reminders:
 1. Make sure your computer's speakers are not muted. Audio is through your computer, not the telephone conference call number.
 2. At the top of your screen, there is a gray options bar. By clicking on the box of arrows on the right side, you can increase the size of the screen.
 3. You can download this presentation via the link in the lower left corner of your screen.
 4. If you have any questions, please submit them throughout the session using the Q&A box on the lower right corner of your screen. It is helpful to include the name of your HUD Program with the question as clarifying information.

Page 2: Today's Presenter Page

- My name is Dr. Rob Haley and I am the Co-Founder and Executive Vice President of StrategyGen. StrategyGen is contracting with Housing and Urban Development (HUD) to facilitate the HUD Standards for Success framework.
- We are working with Thaddeus Wincek who is with HUD's Office of Strategic Planning and Management.
- All previous virtual conferences can be found on the HUD Exchange website.

Page 3: Objectives of Session

- The objectives for this session are to:
 - Provide an integrated view of activities to collect and report Standards for Success data to HUD;
 - Deepen understanding of the inForm tool, HUD's new online data collection and reporting tool; and
 - Answer questions.
- If you use AASC Online or FamilyMetrics, you may be wondering, do I need to enter the information into inForm?
- The answer is no. AASC Online and FamilyMetrics will submit their data to HUD on their behalf. Individuals who use AASC Online or FamilyMetrics do not need to use or enter data into inForm.

- This virtual conference uses examples of data entry into the inForm tool and other discussions involving inForm. Users of AASC Online and FamilyMetrics do not need to view this training as they are not directly inputting information into inForm.
- The review of information regarding data to collect and enter may be of interest to all Pilot Participants.
- As a reminder, if you have questions regarding AASC Online and FamilyMetrics, contact support@pangeafoundation.org [Pronunciation: Pan (rhymes with tan) Jee a (pronounced like the pronoun) Foundation .org]

Page 4: Background

- Now let's put today's Virtual Conference discussion into context.
- The Standards for Success framework measures the self-sufficiency and ability of HUD Participants to obtain and maintain housing through: indicators, or specific measures; and data elements which are data and information used in calculating indicators.
- As the Standards for Success Pilot Program evolved, there are now a total of 99 data elements and 18 indicators.
- You will only be asked to collect data on indicators that your HUD Program has determined are relevant to your program. For most programs, the number is significantly less than the total numbers of 99 data elements and 18 indicators.
- A couple of things to remember:
 - The Pilot Program does not require Grantees and Service Coordinators participating in the Pilot to be held to any benchmarked performance standards and there is no financial reporting in the Pilot; and
 - The calculation of the indicators will be performed at the HUD level. You will not be asked to perform these calculations.

Page 5: Previous virtual conferences focused on data elements

- The data elements can be categorized into the groups represented on this slide.
- Those of you who participated in previous virtual conferences know that the majority of virtual conferences provided training on the data elements.
- As a reminder, links to recordings of these virtual conferences are on the HUD Exchange website.
- Today's virtual conferences discusses how to enter these data elements into the inForm tool and submit it for reporting.

Page 6: Data Collection and Reporting

- This slide is included as a reminder that data and information are collected and entered throughout the year for submission for reporting later in the year. The data collection can include entering the data into inForm or other data management tools.

- All Grantees and Service Coordinators should be actively gathering and entering data. Although it can be tempting, I strongly encourage you to avoid waiting until October approaches to enter data. It is too much information to enter at the very end!
- You do so much work throughout the year, go ahead and enter it at regular intervals to help ensure you capture your many activities related to Participants. Delaying increases the potential of inadvertently not entering some of your work.
- In 2017, you will submit data to HUD for reporting purposes beginning October 1 through October 30.
- Be kind to yourself! Do not wait until late September or October to enter data into the tool! Collect and enter data now! This is especially important to those of you who have not had access to the inForm tool until recently.

Page 7: Training regarding inForm tool

- HUD worked with Grant Solutions to provide you with the inForm tool. inForm, also known as Online Data Collection (OLDC) and Reporting tool, is a web-based tool used to submit your data.
- Grant Solutions provided a user training that introduces you to the tool and provides instruction on the steps to use the tool. Their recorded virtual conference was e-mailed to you and is available on the HUD Exchange website. It is a precursor to the material presented in today's discussion.
- Today's virtual conference is not intended to be an introductory overview of the inForm tool. Our discussion today supplements and builds on the information provided in Grant Solutions' initial training regarding the tool.

Page 8: Data Collection and Reporting

- The purpose of this virtual conference is to discuss data collection and reporting using the inForm tool.
- This session pulls your activities to collect, enter and report data all together.

Page 9: Collecting Data

- To refresh memories, you can think of collecting data as 4 steps.
- First, determine if the data element is relevant to your program.
 - The new inForm tool and some of the other data management tools only present data elements for your program.
 - The Data Integrity Reference Manual has "Applies to Programs" box for each data element.
 - In addition, the reference resource of the Participant Record-level Information (PRLI) Chart lists programs required to collect each data element.

- Another option: Shortcuts and Quick References documents are tailored to individual programs, listing only the data elements relevant to the individual program.
- Second, increase your understanding of the data element.
 - You can review the data element description and data integrity rules for each data element in the Data Integrity Reference Manual.
 - Descriptions are also found in the PRLI, the Participant Record-level Information Chart provided by HUD.
- Third, gather Participant information.
 - The Data Integrity Reference Manual and Shortcuts have examples of questions for all data elements.
- Finally, record appropriate response options.
 - inForm and other data management tools present response options. You will select the appropriate one.

Page 10: Preparing for Reporting

- Throughout the year Grantees and Service Coordinators collect data and information regarding their program, each HUD Participant, and related services and activities.
- As a reminder, Grantees and Service Coordinators are not expected to ask about data elements beyond what services were provided and activities conducted. If Grantees and Service Coordinators can collect information on a data element, they should do so as appropriate. For any data elements which remain unknown, the Grantees and Service Coordinators provide the appropriate response option for the data element, Information not Collected. This is in line with prior and current program practices.
- As you prepare to enter this information into inForm, you can think of the information in the categories of:
 - Grant Award Information, or information that describes your program;
 - Participant Descriptive Information which identifies the people in your program while protecting individual privacy rights; and
 - The focus areas addressing services and the Participant's status related to employment, financial, education, health and housing.
- You might ask yourself the following questions:
 - What is the identifying information for my Grant Award or program?
 - Who are the Participants in my HUD program?
 - These are the individuals enrolled in your HUD program.
 - What is descriptive information for each Participant?
 - With whom have I talked?
 - What is the status or situation of each Participant?
 - Who received what services?
 - Did the Participant's status change?

Page 11: Using the inForm tool

- I mentioned HUD has introduced its new data collection and reporting tool, inForm, for entering the data and information. The tool, developed by Grant Solutions, is accessed through the Grant Solutions web site.

Page 12: Grantee Submission Process

- You probably recall from the Grant Solutions' video conference introducing the Online Data Collection and Reporting tool that the four steps for submitting a report are:
 - Save,
 - Validate,
 - Certify, and
 - Submit.
- The save step retains information that you have collected. Validate involves checking rules and identifies any missing information or other errors. The certify step includes signing the report electronically. Finally, submit involves presenting the report to HUD.

Page 13: Using the inForm Tool

- After logging into inForm, you can access the tool by selecting OLDC at the top of the landing page. This will take you the inForm On-Line Data Collection Home page.
- To begin entering data, click the Report Form Entry Link on the inForm On-Line Data Collection Home page.

Page 14: Form selection

- The Form Selection screen displays. As a quick refresher from the introductory training regarding inForm, use the drop-down lists to enter the Program Name, Grantee Name and Report Name. Once a program is selected, the options in steps 2 and 3 will change to reflect the requirements of that program. For this training, the Resident Opportunity Self-Sufficiency (ROSS) Program will be used as an example.
- When the first three steps are complete, steps 4, 5 and 6 display. In Steps 4 and 5, you select a Funding Grant Period and the Report Period.

Page 15: Report Period

- The Report Period is the Reporting Period Beginning Date through the Pilot Period End Date.
- The Reporting Period Beginning Date corresponds with the first date that you could potentially collect data.
- It continues to September 30, 2017 which is our Pilot Period End Date. In future years, the end date will correspond to the final date of the fiscal year of the Grant Award.

- The Reporting Period is the time in which your Grant is in force and you are collecting data.
- In the Standards for Success Pilot, the dates are assigned by HUD and identified in the tool.

Page 16: Form Selection (continued)

- After selecting the Report Period in Step 5, you move onto step 6.
- Step 6 is to select an action. Then click the Enter button.
- This course discusses an approach to create a new report. Creating a new report falls under the action New/Edit/Revise Report.

Page 17: Reports Section

- After selecting New/Edit/Revise Report, the Report Sections screen displays.
- Once again, I will offer reminders from the introductory training.
- The light blue box centered at the top of the screen summarizes the selections made in Forms Selection. Always review this information before you continue. If something is wrong, click the link next to the step and correct it.
- In the middle of the screen are dark blue buttons for viewing or adding attachments, printing the report and validating the report. Because you are still early in the process, there is no need to validate at this point.
- Two sections are available on the “Report Sections” screen: the Cover Page and Household Identifier. Below the dark blue buttons are the Cover Page and Household Identifier. By default, there is a Cover Page section and at least one Household Identifier. Each of these sections contains Select Action buttons with drop-down lists under the column heading Perform Actions.
- For example, you will usually have more than one Household Identifier and can add sections by selecting Create Section Data from the drop-down list and clicking the Go button.
- To work on the cover page of your report, select Edit Section from the drop-down list and click the Go button.

Page 18: Cover Page and Household Identifier

- Represented on this slide is an example of both the Participant Record-level Report Cover Page and the Participant Record-level Report Household Identifier Page.
- The Cover Page is one of the early sections you will come to when accessing the tool after signing in. Once you choose your grant program and reporting period, you will be transitioned to this page, shown on the image to the left. Here, you can attach documents and review your grant program to make sure the information is correct.

- The Household Identifier page comes next. Here is where you will input the correct response options to all the data elements you have been collecting.
- I will take a moment to discuss both pages.

Page 19: Cover Page Section

- First, we will look at the Cover Page.

Page 20: Catalog of Federal Domestic Assistance Number (CFDA)

- Many of the fields for the report cover page are pre-populated. The inForm tool, or Online Data Collection and Reporting tool, pre-populates the majority of the Grant Award Information. A data element that is not pre-populated is the Catalog of Federal Domestic Assistance Number (CFDA).
- This CFDA box on the cover page is labeled 4b. It is highlighted by the green box on this slide.

Page 21: Cover Page – Grant Award Information

- You can find the CFDA number in your Notice of Award. The Notice of Award is HUD's communication of the receipt of your discretionary grant.
- This slide shows segments from a sample Notice of Award. We will use this example to identify the location of the CFDA number in the Notice of Award.
- The CFDA box is labeled number two on your grant Notice of Award and is highlighted in the green box on this slide.
- In this Notice of Award, the CFDA number is 14.870.
- Enter the 5-digit CFDA number for your grant award in the inForm tool's field for CFDA number.

Page 22: CFDA Number

- As you can see on this slide, we added the CFDA number 14.870 to the appropriate location, 4b, on the cover page. This is highlighted with a green box.

Page 23: Household Identifier Section

- Let's talk about the Household Identifier section.

Page 24: Household and Person Identifiers Unique within each Grant Award

- We will start the discussion of Household Identifiers with a quick review of the definition of household.
- A household includes all the people who occupy a housing unit.

- A housing unit is a house, an apartment, a mobile home, a group of rooms, or a single room that is occupied (or if vacant, is intended for occupancy) as separate living quarters.
- The occupants may be a single family, one person living alone, two or more families living together, or any other group of related or unrelated people who share living arrangements. Therefore, for situations other than one person living alone, multiple Participants living in a household will be assigned to a single Household ID.
- The Household Identifier provides a unique identifier, or record identification code, for a single household. It is alpha-numeric, containing both letters and numbers.
- Person Identifier is also referred to as the Participant-ID. It identifies the people enrolled in the program.
- This Person Identifier tells HUD who the individuals are that you serve. It provides the basis for communicating:
 - How many people you served; and
 - The services Grantees and Service Coordinators deliver, for example, enrolled in a GED review course;
- The Person Identifier is a unique record identification code for the Participant assigned by the Grantee and Service Coordinator.

Page 25: Household with Multiple Participants

- Here, you see examples of the inForm tool in use. The first image shows how to create a Household Identifier. You are likely to have multiple households in your program, so you will create a new Household Identifier section for each household.
- The second image shows what you will see after you create or add multiple Household Identifiers. You can go into each Household Identifier to add data or make changes to entered data.
- Finally, you can create Person Identifiers within each household. This is shown in the third image where you have the option to enter a distinct Person Identifier for each Participant.
- Note: If a household has multiple Participants, separate reports need to be created for each Participant age 16 or older within that household. For each Participant age 16 or older, create a separate report with the same household identifier and a new person identifier. Let's discuss how this is done.
- The specific steps for creating reports for each Participant age 16 or older in one household include the following:
 - First, in the Report Sections page, you see a Cover Page section and a Household Identifier section (See the top of the slide);
 - Next, look under Perform Action, select Create Section to create a new section for a second Participant within that one household identifier;
 - Third, in the newly created section, use the same household identifier and that additional Participant's person identifier within the household; and

- Finally, repeat Steps 2 and 3 for additional Participants in one household.

Page 26: Hypothetical Participant – Gloria

- My colleague, Bridget Booth, will take this opportunity to go through some specific data elements pertaining to a hypothetical Participant we will call Gloria. Bridget will discuss how a select number of data element examples apply to the inForm tool and how they can be reported most accurately.
 - This information is provided for illustration purposes, simply to demonstrate how to enter examples of data into the inForm tool. We are not asking you to pursue data you aren't collecting. We respect your program and your approach to collect these data elements. We understand that individuals learn in different ways and we are simply providing an additional way of presenting information for educational and reference purposes.
-
- Bridget: I would like to introduce Gloria to you. Gloria is a hypothetical Participant whose information will be used to demonstrate how some example data elements apply to the inForm tool. We will reference certain events and information pertaining to Gloria's life that she has volunteered as a Participant receiving grant funded services.
 - Gloria lives alone outside of Denver, Colorado. She self-identifies as a Latino woman. Gloria recently turned 65 and began her job at the local mall while receiving services from the program. Gloria does not have a large income, but the extra money helps cover expenses in her life.

Page 27: Data Collection Date

- I want to take a moment to discuss the data collection date. This is the date when data was first collected on the individual/person. This could be the same date as the Intake Date, i.e. when the person moved into the residence on the property, or when the first assessment of the person was conducted.
- The data collection date falls between the Reporting Period Beginning Date and Reporting Period Ending Date.

Page 28: Data Collection Date

- Gloria's intake date was April 30th, 2017. Her Service Coordinator conducted an intake interview on that date and Gloria volunteered much of information regarding herself. Therefore, use April 30th, 2017 as the Data Collection Date.

Page 29: Participant Status Code

- The Participant Status Code identifies if the individual participates in services. Gloria participates in services, so the correct response option is Participant.

- Since we selected the response option Participant, the inForm tool presents all the data elements for entering responses.
- Let's consider another scenario. If there is no assessment of the individual, then the response option for that individual would be Non-participant. If the response option of Non-participant is selected, the inForm tool does not require additional information be input, but the tool provides the option of inputting additional information.

Page 30: Ethnicity Code

- Let's take a look at a few examples of entering data regarding the hypothetical Participant, Gloria.
- First, we'll look at Ethnicity Code.
- This records the Participant's self-identified ethnicity as Hispanic/Latino or not Hispanic/Latino.
- Gloria self-identifies as a Latino woman. Therefore, the correct response option is Hispanic/Latino.
- As you can see on this slide, Hispanic/Latino is selected as the response option.

Page 31: Race Code

- Race Code is the next data element we will discuss. This is the Participant's self-identified race and the Participant may select multiple races. Gloria self-identifies with White, or origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Gloria does not identify with any other race code, so the correct response option is White. This is identified on the slide by the green box and blue highlighted response option.

Page 32: Gender Code

- How about Gender Code? Remember to enter the Gender Code with which each Participant self-identifies.
- Gloria self-identifies as a woman. Therefore, you would select Female from the drop-down menu.
- The correct response option for Gloria's gender code, Female, is identified by the green box and the blue highlighted chosen response option.

Page 33: Head of Household Code

- Let's discuss the Head of Household Code.
- This data element is when a Participant is an adult who is considered the head of the household to determine income eligibility and rent.
- The head of the household must ensure the household fulfills all its responsibilities under the program in conjunction with a co-head or spouse.

- Any qualified member of the household can be designated as the head of the household.
- Gloria lives alone in her apartment. That means she is the head of household. The response options include Yes, No, Information not Collected, Individual refused, and Individual does not know. The correct response option for our hypothetical Participant is Yes.

Page 34: Temporary Assistance to Needy Families (TANF) Code

- The Temporary Assistance to Needy Families, or TANF, Code identifies a Participant who qualified and received cash or other support services under TANF through the Department of Health and Human Services. TANF provides financial assistance to low income families that have children and for women in their last three months of pregnancy and is federally funded through the State.
- Gloria has not provided any information regarding if she receives TANF assistance. Therefore, the correct response option is Information not Collected, even though she does not qualify for TANF.
- Information not Collected is a response option that is used when a Participant does not volunteer information to you regarding the data element. This response option is highlighted on the screen with a green box.

Page 35: Service Start Date and Service End Date

- Service Start Date is the first date the Participant was served or received a service within the reporting period. If a Participant is continuing to receive services which began prior to the Report Period Beginning Date, record the Report Period Beginning Date as the Service Start Date to capture the services for Standards for Success.
- For example, the reporting period for FY16 ROSS is February 1, 2017 through September 30, 2017. If a Participant was continuing to receive services from the prior year on February 1, 2017, record the Service Start Date as February 1, 2017 to capture the information for Standards for Success.
- Service End Date is the date when the Participant is no longer receiving services or is no longer part of the program. It is the date when services are completed or terminated. If the Participant is still receiving services at the end of the reporting period (September 30, 2017), please leave this field blank.
- I will discuss applicable services on the next slide.

Page 36: Service Start Date and Service End Date – Applicable Services

- This slide lists services to which the Service Start Date and Service End Date apply. It is lengthy so I will not review each one.
- The list can also be found in the Data Integrity Reference Manual which can be found on the HUD Exchange website.

Page 37: Service Start Date and Service End Date

- This slide shows the location of the Service Start Date and Service End Date in the inForm tool.
- Service Start Date is number 23 and Service End Date is number 24.

Page 38: Health Coverage Code

- One of the great features of inForm is the capability to select more than one response option for some of the data elements. For example, you can select multiple response options for Health Coverage Code.
- Gloria recently turned 65 years old. This means she is eligible for and receives Medicare. Gloria also has a supplemental insurance through a commercial insurance company. Therefore, you would select both Medicare and Yes, purchased insurance from insurance company.
- To select multiple response options, you use the control button on your keyboard. While holding down the control button, click the first response option. Continue to hold the control key and click the next response option you would like. This will highlight both options and allow you to submit more than one response option as appropriate.
- For Gloria, we select both Medicare and Yes, purchased insurance from insurance company for her supplemental plan.

Page 39: Employment Status Code

- I would like to go into detail on a few employment data elements and how you will submit this information in inForm.
- As we know, Gloria is employed at the local mall. She has been employed a few weeks.
- The first employment data element that we will enter is the Employment Status Code.
- If a Participant's situation changes during the reporting period, record the most recent status of the Participant.
- The Employment Status Code addresses employment information for any Participant age 16 and older.
- The Participant is considered employed if the Participant did any work for pay during the prior four weeks including the data collection date, even if only for a few hours.
- The work must be for pay. Unpaid, volunteer hours do not meet the definition of employed.
- We know that Gloria works for pay at the local mall, meaning she is employed.
- The data element and response options are shown outlined in a green box on this slide.
- In the inForm tool, we would select the option highlighted in blue, Employed.
- Reminder, the response option of Information not Collected is available when the Participant does not volunteer the information needed to report on a specific data element.

Page 40: Entered Employment Date

- Gloria has been employed at the local mall for a few weeks and enjoys her work. She works to make money for some of her expenses including her supplemental insurance referenced earlier. For this data element, we need to determine when Gloria was first employed by the mall. In previous conversations with Gloria, she said her start date at the mall was August 1, 2017.
- In the inForm tool, this response option is recorded by using an online calendar. For Gloria, it is most appropriate to choose August 1st, 2017 as the correct response option date. On this slide, the calendar is highlighted by the green box and shows the correct date recorded.
- Simply click the appropriate date to enter the correct response option.
- Notice to the right of the response option of the date is a separate response option of Information not Collected. In cases where the response option is a date or number, the response option of Information not Collected is available on the right.

Page 41: Employment Type Status Code

- Another important data element regarding employment is the Employment Type Status Code. This identifies whether the Participant is full or part-time.
- Part-time is described as working less than 35 hours per week, while full-time is described as working 35 hours or more per week. We know that Gloria works part-time which is less than 35 hours per week.

Page 42: Employment Type Status Code

- In the inForm tool, we will select the response option part-time for Gloria's employment type. Gloria volunteered the information that she works a maximum of 20 hours per week at the mall which is less than 35 hours per week. Therefore, Gloria is a part-time worker employed in the last month.
- This response option is found on the right side of the screen in the drop-down menu.

Page 43: Monthly Paid Earnings Amount

- The employment data element, monthly paid earnings amount, calculates gross earnings an employee earns before taxes or other deductions are applied.
- This includes total gross earnings from all employment for the prior four weeks.
- The answer is reported in whole dollars.
- For our hypothetical Participant, the Monthly Paid Earnings Amount is \$600.
- The response option for this data element is to enter \$600 as a whole number.

Page 44: Primary Care Provider

- I want to switch gears from employment data elements and discuss two changes in the life of our hypothetical Participant.
- Again, if a Participant's situation changes during the reporting period, record the most recent status of the Participant.
- Gloria selected a primary care provider when she began to receive Medicare. This was a positive change resulting in her receiving regular needed medical care. She sees her primary care provider on a regular basis.
- The Primary Health Care Provider Code identifies a Participant who has a health care provider such as a general doctor, specialist doctor, nurse practitioner, or physician's assistant.
- The Participant must have completed an appointment with their health care provider in the prior three years.
- For our hypothetical Participant Gloria, we know that she has a primary health care provider and has completed an appointment in the prior year. Therefore, the correct response option is Yes.
- This is shown on the right side of the screen highlighted in blue.

Page 45: Medical Examination Status Code

- The Medical Examination Status Code data element identifies a Participant who received a routine medical examination by a health care provider in the prior 12 months such as a wellness visit.
- From our previous discussion, we know that Gloria has a primary care provider that she sees regularly. Her appointments have included a routine medical examination in the prior 12 months.
- This means that the correct response option is Yes. Gloria has received a routine medical exam in the prior 12 months.
- This concludes my discussion of Gloria and entering data and information regarding Gloria into inForm. You can see Gloria is on her way to greater self-sufficiency. The data entered into the inForm tool reflects this. I'll now turn the discussion back to Dr. Rob Haley.

-
- Rob: Thanks, Bridget
 - Next, we will quickly revisit the steps to submit the data for reporting that were covered in detail in the introductory inForm training.
 - I imagine you remember, the four steps to submit the data for reporting are:
 - Save,
 - Validate,
 - Certify, and

- Submit.

Page 46: Saving Information

- By entering and saving your data you are retaining the information you worked diligently to collect.
- In fact, it is a good idea to save your data regularly during data entry to avoid losing any information in the event of loss of power or if you “time out” of a session.
- Save your data before validating the data and information.

Page 47: Validate

- The blue Validate button is identified by the green box on the right of your screen.
- The validation step checks your report against the rules and identifies any missing information or other errors. If you validate and there is missing information or other errors, you cannot move forward in the reporting process until all errors are fixed. When all errors are fixed, click the Validate button again.
- When done correctly, Validated will be checked on the Report Progress bar at the top of the screen. See the green box on the upper left side of this slide to see Validated on the Report Progress bar.

Page 48: Certify

- The Certify step is where your Authorized Certifying Official adds her or his electronic signature. The Authorized Certifying Official of the program completes this step.
- Notify your Authorized Certifying Official when your report is validated and ready to be certified.
- As a reminder, the Cover Page contains the Certify step.
- On the Cover Page section of the report, see Certification information beginning with item 10. This is identified by the thick green arrow on the slide.
- When the Authorized Certifying Official clicks Certify, inForm will warn the Authorized Certifying Official that changes made after saving and validating will be lost, and the Authorized Certifying Official has the ability to sign in the signature area by pressing the Click to Sign button. Click the OK button.
- Next, the Authorized Certifying Official clicks the Click to Sign button to see the e-signature and a check mark under certified within the Report Progress bar. The Click to Sign button is identified on your slide with a blue box outlined in green.

Page 49: Submit

- In this example, no changes are necessary so you move on to the submission step. Click the Submit button. A pop-up box appears asking if you wish to officially submit your report. Click OK.
- Another pop up window confirms your report has been received. Click OK.

- inForm moves you to the Report Form Status page. Here you can print the report or under Report Action section, review the report or unsubmit it.
- By following steps described in this discussion, you can successfully submit your data and information to HUD.

Page 50: When can I change information in the report?

A great question is, “When can I change information in the report?”

- There are opportunities at each stage to modify the information in your report before the Grantor locks down the report.
- Before you submit the report, modifying information is quite simple. You enter the report using the New/Revise/Edit option from the Action box that was discussed when initiating a report.
- You can edit entries by selecting the response options and selecting a revised response option.
- The next option for modifying information is Uncertify: After certifying your report, you can use the option of uncertify. This will allow you to modify the information you previously entered in the report. After completing your changes, simply save, revalidate and recertify the report again.
- The third option: If you have already submitted the report, but the Grantor has not locked down the report and you need to make changes, click the Unsubmit Report button. This enables you to revise the report. Once your revisions are made and saved, you must revalidate, recertify and resubmit the report.
- At all of these stages, you have the option to edit the information. Remember to save the report after making the appropriate changes!

Page 51: Pilot Program Dates

- As I discussed earlier in this virtual conference, Grantees and Service Coordinators have been collecting and entering data regarding Participants in their programs throughout the year. The Reporting Period for each program ends on September 30th, 2017. Data is submitted to HUD by October 30th, 2017.

Page 52: Report Submission Due Date

- It is important to remember that for all programs, the data submission due date is October 30th, 2017. Please mark this date in your calendars.
- You have from October 1st until the 30th to submit all data you have been collecting and entering at regular intervals.
- It is very important to remember to be entering data into the inForm tool or other data management tools now (and all throughout the year). Do not wait until the end of September and October! Enter data at regular intervals to accurately and represent all the hard work you do.

- This virtual conference was created to bring together the activities to collect, enter and report data using inForm. We have taken you through the steps to gather information; create a report specific to your program; enter select data elements; and save, validate, certify, and submit your work.

Page 53: Summary

- I want to go over a few key points from this virtual conference as you prepare for submitting data to HUD.

Page 54: Summary

- The inForm tool and other select tools only present data elements relevant to your Program. You are not required to collect and enter all 99 data elements. You are only asked to collect and enter data elements identified as relevant to your Program by your Program Office.
- All Grant Award and Participant Descriptive data elements apply to all grants.
- Collecting and entering data into the inForm tool or other data management system at regular intervals during the year facilitates complete and accurate reporting of information. Enter your data now!
- If a Participant's situation changes during the reporting period, record the most recent status of the Participant.
- The inForm tool offers multiple options for changing data in a report before the Grantor locks down the report.
- The dates for submitting data to HUD for reporting purposes are October 1 – October 30, 2017. The report submission due date is October 30, 2017.

Page 55: Contact Information for the inForm Tool

Important question: I need help with the inForm tool. Who can I contact?

- For assistance with the inForm tool, the type of question or request you have determines who you contact.
- For:
 - Requests for new inForm accounts; and
 - Questions regarding "how-to", or steps to use the tool contact:
 - AskGMO@hud.gov
- You probably recognize this is the same e-mail address you use for general questions or feedback regarding Standards for Success.
- For requests for reminders of usernames, resetting passwords and questions regarding inForm's technology, please contact:

- help@grantsolutions.gov.
- You can also contact Grant Solutions by phone at:
 - 202-401-5282; or
 - 1-866-577-0771.
- For program-specific questions, speak to your HUD Program contact person.

Page 56: Summary of Reference Materials

- I want to remind you that HUD has provided reference materials that will help you with your data collection and reporting activities.
- Reference materials are listed on this slide.
- The HUD Exchange website houses the most recent versions of reference materials. The website address is provided.
- Did you know you can also Google “HUD Exchange Standards for Success” to find this website?
- For those of you participating in a group virtual conference on Adobe Connect, we will respond to questions submitted through the Q&A dialogue box on Adobe Connect. I will ask Bridget Booth to answer your questions. Please submit all questions through the Q&A dialogue box at the lower right of your screen.