

HUD Standards for Success Pilot

Data Collection: Participant Health Data Elements

Virtual Conference

April 17, 2017

Today's Presenter

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Co-Founder and Executive
Vice President
StrategyGen



Objectives of Session

1. Increase understanding of data integrity and collection
 - a. Participant Health data elements
2. Review reference resources
3. Answer questions

At the end of this session, you will:

1. Understand Participant Health data elements

Background

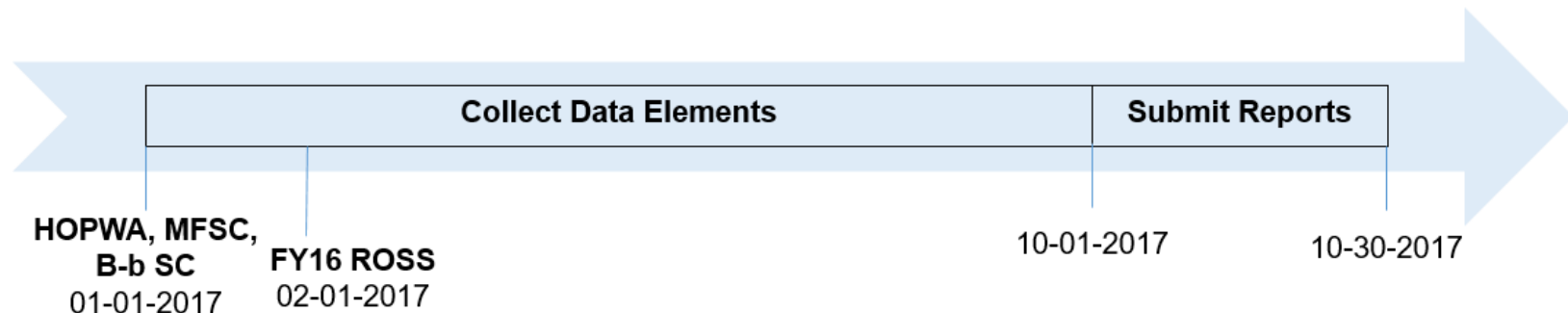
Refresh - The Fundamentals

Standards For Success

- HUD's new data collection and reporting framework for its discretionary grants.
- Standardization of data elements, definitions, data collection, and reporting
- An improved reporting tool for multiple types of grants eliminating duplicative requirements across programs
- Options of data extracts from current technology system
- Reduced frequency of reporting

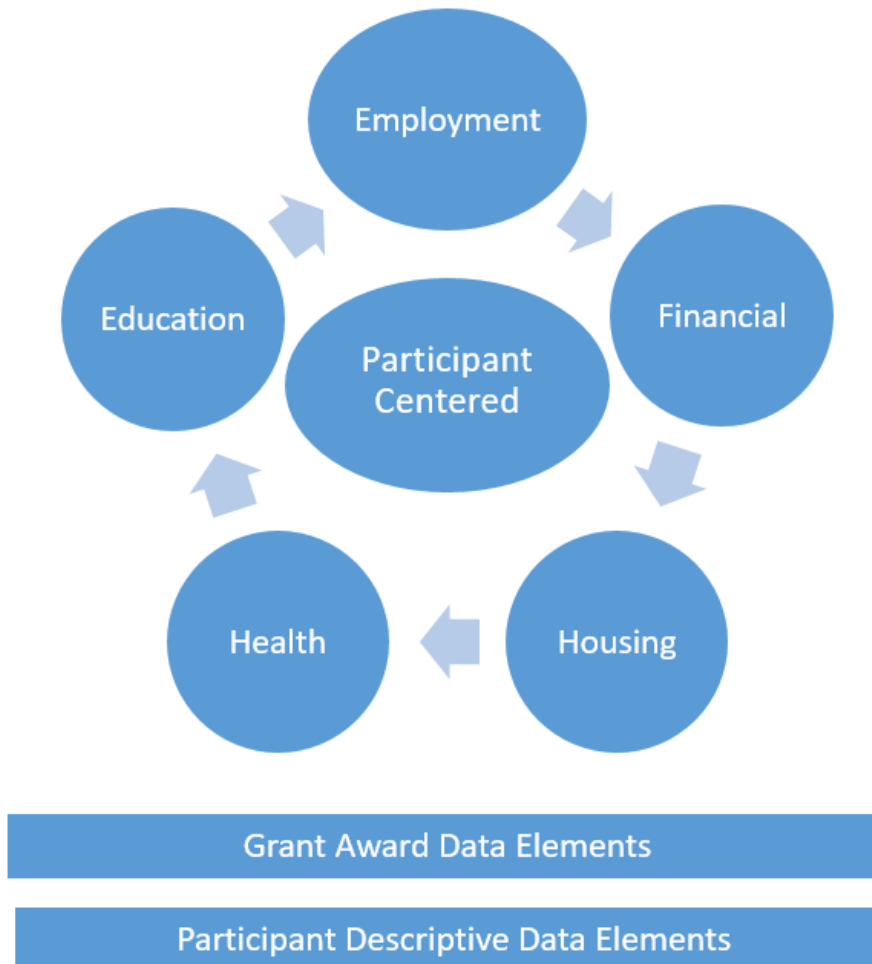
Grantees' Responsibilities

- Maintain data integrity
- Collect data
- Report data
- Protect Personal Identifiable Information (PII)
- Provide feedback



Participant Centered Data Elements

Focus Areas for Participant Self Sufficiency



Highlights from Previous Virtual Conferences

- All Grant Award and Participant Descriptive data elements apply to all grants.
 - Other data elements may not apply to all grants.
- Each Participant will have a unique Person Identifier, an identification code assigned by the Grantee.
- The Data Collection Date is collected for every piece of information gathered regarding Participants.
- For the majority of questions, Participants are not required to provide an answer. Response options include:
 - Individual refused
 - Individual does not know
 - N/A
- Select services may be received:
 - Directly through a grant;
 - Through a grant – facilitated service; or
 - Both

Participant Health Data Elements

Participant Health Data Elements – List

Data Element	Data Element
Supplemental Nutrition Assistance Program (SNAP) Code	Disability Status Code
Temporary Assistance to Needy Families (TANF) Code	Disability Category Code
Food and Nutrition Service Code	Activities of Daily Living (ADL) Count
Health Coverage Code	Instrumental Activities of Daily Living (IADL) Count
Primary Health Care Provider Code	Adult Personal Assistance Service Code
Medical Examination Status Code	Disability Requires Assistance Code

Participant Health Data Elements – List (Continued)

Data Element	Data Elements
Translation/ Interpretation Service Code	Asthma Condition Code
Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code	Asthma-related Emergency Room Visit Code
HIV/AIDS Service Code	Blood Level Test Code
Mental Health Service Code	Blood-Lead Test Result
Substance Abuse Service Code	Medical Care Service Code
Substance Abuse Treatment Code	

Supplemental Nutrition Assistance Program (SNAP) Code

SNAP

- SNAP offers nutrition assistance to low income individuals and families.
- Benefits are through the Department of Agriculture. Applications are handled through state and county offices.
- SNAP works with state agencies, nutrition educators, and neighborhood and faith based organizations to ensure access to benefits.

Applies to Grants:

202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Title: Supplemental Nutrition Assistance Program (SNAP) Code

Question: Do you receive Supplemental Nutrition Assistance Program benefits?

Focus Area: Health

PRLI Fixed ID: 25

Supplemental Nutrition Assistance (SNAP) Code

✓ Select

1 = Yes
2 = No
88= Individual refused.
99= Individual does not know.
N/A

Temporary Assistance to Needy Families (TANF) Code

TANF
<ul style="list-style-type: none"> TANF provides financial assistance to low income families that have children and for women in their last three (3) months of pregnancy. Qualified individuals receive cash or other support services under TANF through the Department of Health and Human Services. TANF is federally funded but administrated by each State.

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Title: Temporary Assistance to Needy Family (TANF) Code

Question: Do you receive Temporary Assistance to Needy Family benefits?

Focus Area: Health

PRLI Fixed ID: 26

Temporary Assistance to Needy Family (TANF) Code
✓ Select
1 = Yes
2 = No
88= Individual refused.
99= Individual does not know.
N/A

Food and Nutrition Service Code

Participant received food and nutrition services

- Food and nutrition services include:
 - Women, Infant, and Children (WIC) program
 - Congregate meal services such as Meals on Wheels
 - Emergency food programs and food banks
 - Grocery shopping or cooking services
 - Donated food items from family, friends, individuals, and other resources in the community
- Food and nutrition services does not include SNAP.

Applies to Grants:			
202	Y	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	N	ROSS	N



Service Coordinators Meeting – John and Kathy

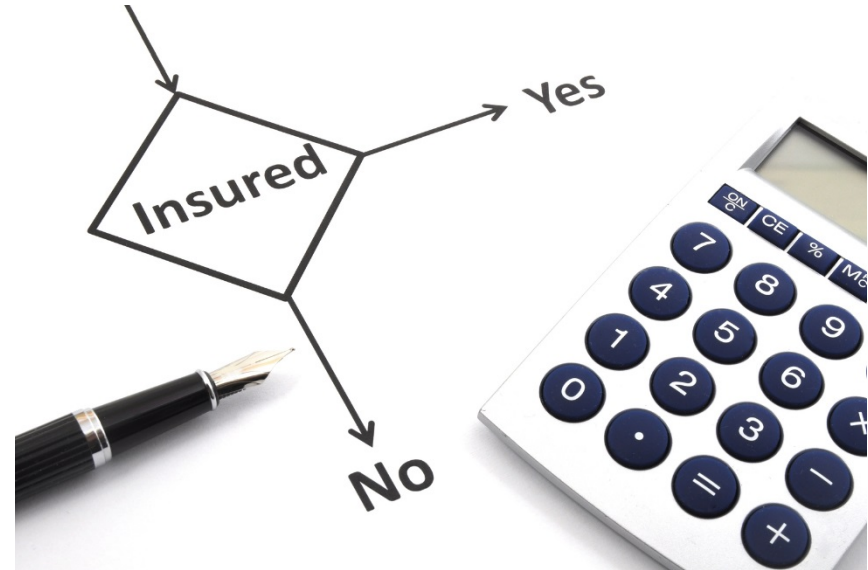


Health Coverage Code

Participant has health insurance and type of coverage

- Identify Participant who has public or private health insurance.
- If the Participant has insurance, identify the organization that provides the insurance.
- Insurance may be purchased by either the Participant or by any family member on the Participant's behalf.
- Participant is considered uninsured if they only have specialized coverage such as accidents or dental care, or have no insurance.

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y



Health Coverage Code

Title: Health Coverage Code

Question: Do you have health insurance and if yes, what organization provides the insurance?

Focus Area: Health

PRLI Fixed ID: 38

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Health Coverage Code

✓ Select

- 1 = Yes, covered through employer or union (current or former).
- 2 = Yes, purchased insurance from insurance company.
- 3 = Medicare.
- 4 = Medicaid/Medical Assistance.
- 5 = TRICARE or other military health care.
- 6 = VA health care.
- 7 = Indian Health Service.
- 8 = Other health insurance or health coverage plan.
- 9 = No coverage.
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Health Coverage Code

Title: Health Coverage Code

Question: Do you have health insurance and if yes, what organization provides the insurance?

Focus Area: Health

PRLI Fixed ID: 38

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

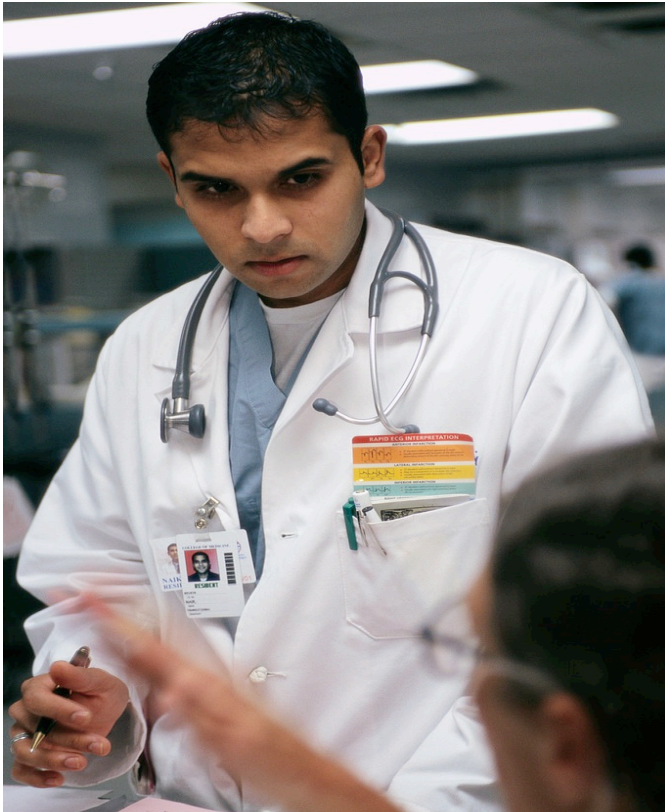
Health Coverage Code

✓ Select

- 1 = Yes, covered through employer or union (current or former).
- 2 = Yes, purchased insurance from insurance company.
- 3 = Medicare.
- 4 = Medicaid/Medical Assistance.
- 5 = TRICARE or other military health care.
- 6 = VA health care.
- 7 = Indian Health Service.
- 8 = Other health insurance or health coverage plan.
- 9 = No coverage.
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Primary Health Care Provider Code

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y



- Identify Participant who has a health care provider such as a general doctor, specialist doctor, nurse practitioner, or physician's assistant.
- Participant has completed an appointment with a health care provider in the prior three (3) years.

Medical Examination Status Code

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y



- Identify Participant who received a routine medical examination by a health care provider in the prior twelve (12) months such as a wellness visit.

Disability Status Code

Title: Disability Status Code

Question: Did a physician, Medicaid, or other authority determine you are disabled?

Focus Area: Health

PRLI Fixed ID: 18

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Disability Status Code
✓ Select
1 = Yes, individual indicates a disability as defined in ADA.
2 = No, individual indicates no disability as defined by ADA.
88= Individual refused.
99= Individual does not know.
N/A

Disability Status Code

Title: Disability Status Code

Question: Did a physician, Medicaid, or other authority determine you are disabled?

Focus Area: Health

PRLI Fixed ID: 18

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Disability Status Code

✓ Select

1 = Yes, individual indicates a disability as defined in ADA.
2 = No, individual indicates no disability as defined by ADA.
88= Individual refused.
99= Individual does not know.
N/A

Disability Category Code

Title: Disability Category Code
Question: What types of disabilities do you have?
Focus Area: Health
PRLI Fixed ID: 19

Applies to Grants:			
202	N	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	N	ROSS	Y

Disability Category Code

✓ Select

- 1 = Impairment is primarily physical, including mobility and sensory impairments.
- 2 = Impairment is primarily mental, including cognitive and learning impairments.
- 3 = Impairment is both physical and mental.
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Disability Category Code

Title: Disability Category Code
Question: What types of disabilities do you have?
Focus Area: Health
PRLI Fixed ID: 19

Applies to Grants:			
202	N	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	N	ROSS	Y

Disability Category Code

✓ Select

1 = Impairment is primarily physical, including mobility and sensory impairments.

2 = Impairment is primarily mental, including cognitive and learning impairments.

3 = Impairment is both physical and mental.

88= Individual refused.

99= Individual does not know.

N/A

Activities of Daily Living (ADL) and Instrumental Activities of Daily Living

Applies to Grants:

202	Y	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	N	ROSS	Y

Activities of Daily Living (ADLs)

ADLs are basic self-care tasks of every-day life

- Eating
- Bathing
- Grooming
- Dressing
- Transferring
- Other activities HUD deems essential for independent living

Instrumental Activities of Daily Living (IADLs)

IADLs are the complex skills needed to successfully live independently

- Handling personal finances
- Meal preparation
- Shopping
- Traveling
- Doing housework
- Using the telephone
- Taking or managing medications
- Other activities HUD deems essential for independent living

Participant is assessed and demonstrated need for assistance.

How many activities of daily living are you unable to perform?

ADLs	Demonstrated Inability
Eating	X
Bathing	
Grooming	
Dressing	
Transferring	
Total	1

Title: Activities of Daily Living (ADL) Count
 Question: How many activities of daily living are you unable to perform?
 Focus Area: Health
 PRLI Fixed ID: 31

Activities of Daily Living (ADL) Count
✓ Enter
Number N/A

How many activities of daily living are you unable to perform?

ADLs	Demonstrated Inability
Eating	X
Bathing	
Grooming	
Dressing	
Transferring	
Total	1

Title: Activities of Daily Living (ADL) Count
 Question: How many activities of daily living are you unable to perform?
 Focus Area: Health
 PRLI Fixed ID: 31

Activities of Daily Living (ADL) Count
✓ Enter
1
N/A

Instrumental Activities of Daily Living (IADL) Count

IADLs	Demonstrated Inability
Handling Personal Finances	X
Meal Preparation	X
Shopping	
Traveling	
Doing Housework	
Using the Telephone	
Taking or Managing Medications	
Total	2

Title: Instrumental Activities of Daily Living (IADL) Count

Question: How many instrumental activities of daily living are you unable to perform?

Focus Area: Health

PRLI Fixed ID: 32

Instrumental Activities of Daily Living (IADL) Count

✓ Enter

Number

N/A

Instrumental Activities of Daily Living (IADL) Count

IADLs	Demonstrated Inability
Handling Personal Finances	X
Meal Preparation	X
Shopping	
Traveling	
Doing Housework	
Using the Telephone	
Taking or Managing Medications	
Total	2

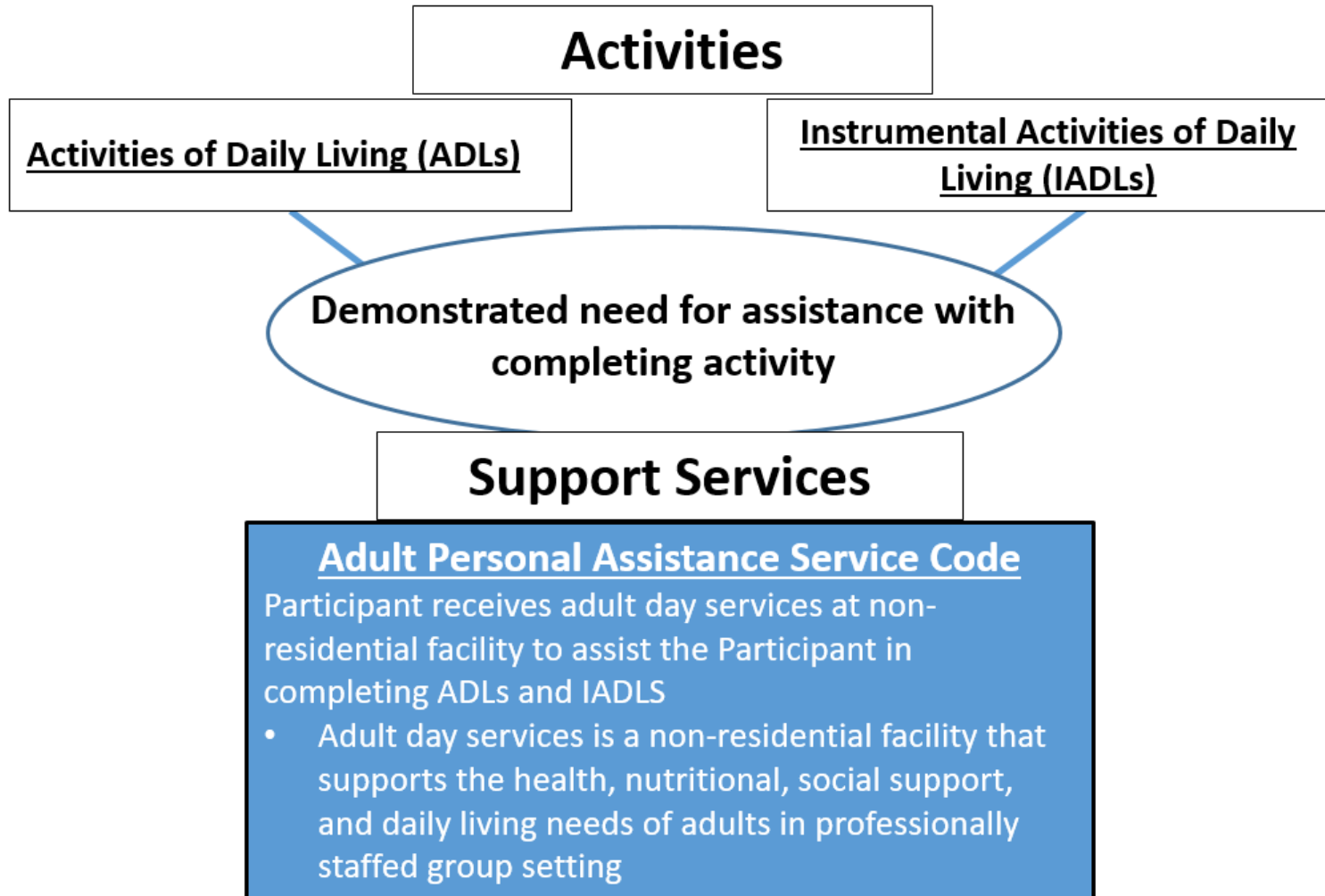
Title: Instrumental Activities of Daily Living (IADL) Count
Question: How many instrumental activities of daily living are you unable to perform?
Focus Area: Health
PRLI Fixed ID: 32

Instrumental Activities of Daily Living (IADL) Count

✓ Enter

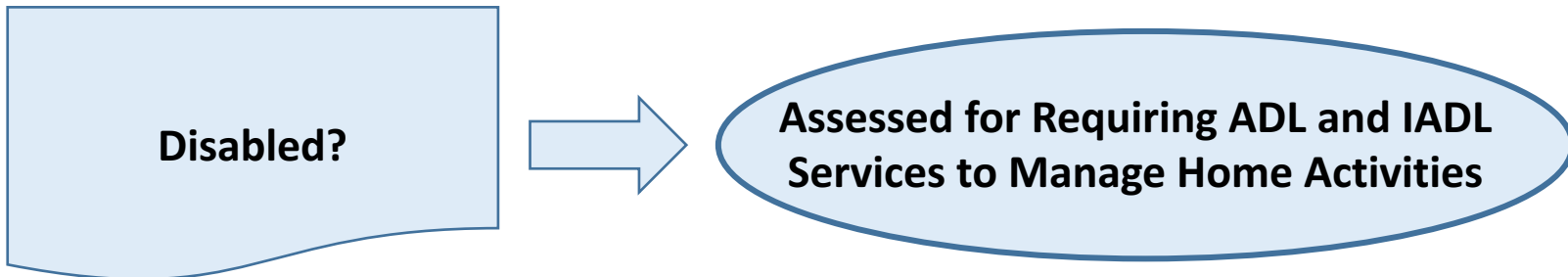
2
 N/A

Adult Personal Assistance Code



Disability Requires Assistance Code

Applies to Grants:			
202	N	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	N	ROSS	Y



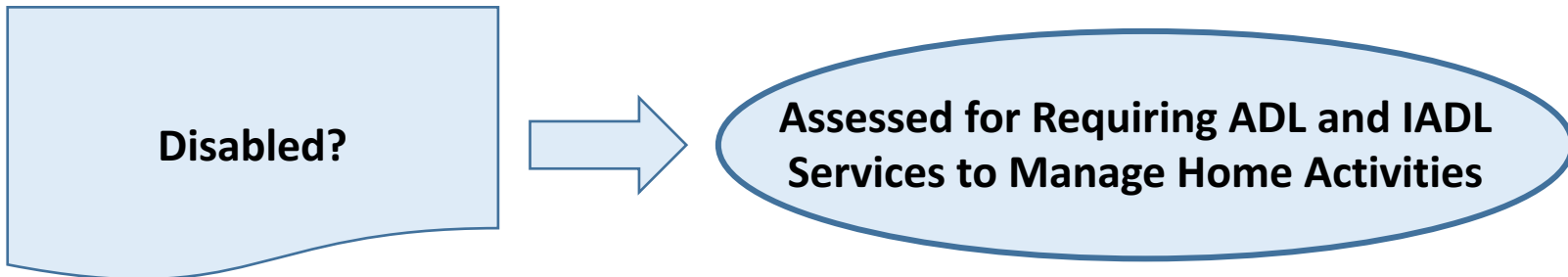
Disability Requires Assistance Code

✓ Select

- 1 = The disabled individual requires services to manage home activities.
- 2 = The disabled individual does not require services for home management.
- 3 = The disabled individual was not assessed for this criteria
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Disability Requires Assistance Code

Applies to Grants:			
202	N	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	N	ROSS	Y



Disability Requires Assistance Code

✓ Select

- 1 = The disabled individual requires services to manage home activities.
- 2 = The disabled individual does not require services for home management.
- 3 = The disabled individual was not assessed for this criteria
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Translation/ Interpretation Service Code

Title: Translation/Interpretation Service Code

Question: Did Participant receive translation or interpretation services?

Focus Area: Health

PRLI Fixed ID: 79

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	Y	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	N

Translation/Interpretation Service Code

✓ Select

- 1 = Received service directly through the grant.
- 2 = Received service through grant-facilitated referral.
- 3 = Both 1 and 2.
- N/A

Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code

Title: Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code

Question: Did a health care provider diagnose you with AIDS, HIV-1, or HIV-2?

Focus Area: Health

PRLI Fixed ID: 30

Applies to Grants:			
202	Y	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	N
JOBS+	N	ROSS	N

Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code

✓ Select

- 1 = The individual identified as being infected with HIV/AIDS.
- 2 = The individual identified as not being infected with HIV/AIDS.
- 88= Individual refused.
- 99= Individual does not know.
- N/A

HIV/AIDS Service Code

Title: HIV/AIDS Service Code

Question: Did the Participant receive HIV/AIDS health and counseling services?

Focus Area: Health

PRLI Fixed ID: 94

Applies to Grants:			
202	N	JRAP	N
FSS	N	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	N	ROSS	N

HIV/AIDS Service Code

✓ Select

- 1 = Received service directly through the grant.
- 2 = Received service through grant-facilitated referral.
- 3 = Both 1 and 2.
- N/A

Mental Health Service Code

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Mental Health Service Code

Identify Participant who received mental health services from a psychiatrist or credentialed psychologist, therapist, or another mental health counselor that may include:

- Individual and group counseling
- Loss of a loved one
- Relationship issues
- Mental Illness

Substance Abuse Service Code

Mental Health Service Code

- Services provided by a psychiatrist or from a credentialed psychologist, therapist, or mental health counselor which includes:
 - Individual counseling
 - Group counseling
 - Loss of a loved one
 - Relationship issues
 - Mental Illness

- Mental health workers treating substance abuse
- Alcohol and Drug Treatment Facilities
- Mental issues from substance abuse

Substance Abuse Service Code

- Services for use of addictive substances
 - AA
 - NA
 - Volatile substance abuse
 - Smoking cessation, etc.

Substance Abuse Treatment Code

Title: Substance Abuse Treatment Code

Question: Are you currently being treated for substance abuse or have you been treated for substance abuse in the last twelve (12) months?

Focus Area: Health

PRLI Fixed ID: 29

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Substance Abuse Treatment Code

✓ Select

- 1 = The individual is being treated for substance abuse or dependence.
- 2 = The individual is not being treated for substance abuse or dependence, but did receive treatment in past 12 months.
- 3 = The individual was not treated for substance abuse or dependence in past 12 months, but did receive such treatment over a year ago.
- 4 = The individual never received treatment for substance abuse or dependence.
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Substance Abuse Service Code

Title: Substance Abuse Service Code

Question: Did Participant receive substance abuse services?

Focus Area: Health

PRLI Fixed ID: 98

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	N	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Substance Abuse Service Code
✓ Select
1 = Received service directly through the grant.
2 = Received service through grant-facilitated referral.
3 = Both 1 and 2.
N/A

Asthma Condition Code and Asthma-related Emergency Room Visit Code



Title: Asthma Condition Code
Question: Did a health care provider diagnose you with asthma?
Focus Area: Health
PRLI Fixed ID: 57

Asthma Condition Code

✓ Select

- 1 = Yes
- 2 = No
- 88= Individual refused.
- 99= Individual does not know.
- N/A



Title: Asthma-related Emergency Room Visit Code
Question: Did you visit the emergency room or were you hospitalized for an asthma-related condition in the prior twelve (12) months?
Focus Area: Health
PRLI Fixed ID: 58

Asthma-related Emergency Room Visit Code

✓ Select

- 1 = Yes
- 2 = No
- 88= Individual refused.
- 99= Individual does not know.
- N/A

Blood-Lead Test Code and Blood-Lead Test Result

Applies to Grants:

202	N	JRAP	N
FSS	N	LBPHC	Y
HC	N	LHRD	Y
HOPWA	N	MFSC/B-b SC	N
JOBS+	N	ROSS	N

Medical Care Service Code

Applies to Grants:			
202	Y	JRAP	Y
FSS	Y	LBPHC	N
HC	N	LHRD	N
HOPWA	Y	MFSC/B-b SC	Y
JOBS+	Y	ROSS	Y

Medical or Health Care Services

Prescription Medications

Dental Services

Home Health Services

Receipt of Durable Medical Equipment

Nutrition Therapy

Discounted Lifeline Programs



Provided by

Pharmacist

Dentist & Dental Assistant

Nurse Practitioner, Registered Nurse, Home Health Aide

Other Healthcare Provider

Credentialed Nutritionist

Telecommunication Providers

Summary

Summary

- No Personal Identifiable Information is reported to HUD.
- The Health Coverage Code includes identifying: (1) if the Participant has insurance; and (2) the organization that provides the insurance.
- Data elements identify if the Participant:
 - Has a primary care provider;
 - Had a routine medical exam by a health care provider; and
 - Received medical services and mental health services.
- Select Substance Abuse Services are also Mental Health Services.
- The Activities of Daily Living (ADL) Code and the Instrumental Activities of Daily Living (IADL) Code record the number of activities the Participant cannot perform at the time of assessment.

Questions and Answers

Questions or Feedback Contact Information

HUD e-mail: askgmo@hud.gov



Include:

- Standards for Success in the e-mail's subject line
- Name of Program in e-mail

HUD Standards for Success Virtual Conference 4 – Data Collection Participant Health Data Elements

Page 1: Cover Page

- Welcome to HUD’s Standards for Success Pilot Program’s Virtual Conference addressing Participant Health Data Elements.
- If you are participating in a scheduled virtual conference I want to provide a few Technology Reminders:
 1. Audio is through your computer. Please listen via your computer, not the telephone conference call #.
Make sure your computers’ speakers are not on mute.
 2. To increase the viewing size of the presentation document:
At the top of your screen, there is a gray options bar. On the right side of the gray options bar is a box of arrows.... click on the box of arrows to increase the size of the screen.
 3. If you would like to download the presentation document, it is available for download from the Adobe Acrobat platform. See the lower left side of your screen.
 4. Feel free to submit questions throughout the session. It is helpful to include the name of your Grant Program with the question as clarifying information. The questions will be discussed after the presentation during Q&A. Do you have a specific topic or need that you would like to hear more information regarding? We also welcome your suggestions and requests for additional training topics. You can submit that information via questions also.

Please complete the evaluation form of this session before you leave the virtual conference. The [link to the evaluation](#) can be accessed at the right side of your screen, middle of the page.

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 an 8(a), woman-owned business that specializes in quality and performance improvement. StrategyGen is contracting with HUD to facilitate the HUD Standards for Success Pilot Program.
- We are working with Thaddeus Wincek who is with HUD’s Office of Strategic Planning and Management, Grants Management and Oversight.
- This virtual conference is part of a series of training sessions regarding the Standards for Success framework and methodology.
- Recordings of previous virtual conferences are available through:
 - Links that HUD e-mailed to you; and

- On the HUD Portal. HUD indicates the HUD portal should be completed in the near future.
- Now, let's move on to today's discussion topic.

Page 3: Objectives of Session

- There are three objectives for this session.
 - Our first objective is to understand the Participant Health Data Elements. Understanding these topics will facilitate your collecting the data for subsequent submission to HUD. Like the last virtual conference, practical data integrity and collection tips are included as part of the discussion.
 - We will also review reference resources throughout the discussion so you will know where to find reference information.
 - Consistent with previous virtual conferences, we will answer your questions.

Page 4: At the end of this session, you will:

At the end of this session, you will:

- Understand Participant Health data elements.
- Health is fundamental to a Participant's progress toward self-sufficiency and independence related to housing.

Page 5: Background

- There have been four virtual conferences discussing HUD's Standards for Success Pilot Program including Thaddeus Wincek's Kickoff conference.
- During this time you all helped me to understand that the experience level of Grantees and Service Coordinators varies as it relates to collecting and reporting data.
- So, I wanted to take a few moments to review some of the major points from the information that has been covered to date. Just a brief revisit of background information and not a comprehensive review.
- If you would like a more detailed review, I encourage you to view the recording of any of the training sessions presented to date.

Page 6: Refresh- The Fundamentals

- Starting at the beginning, the Standards for Success is a framework used to measure HUD Participants' self-sufficiency and their ability to obtain and maintain housing. It is HUD's new data collection and reporting framework for discretionary grants. Standards for Success includes:
 - Standardized Data Elements, Data Element definitions, and a common approach to collect and report data.

- It also includes an improved reporting tool that can be used for multiple grant types thus eliminating duplication.
 - Standards for Success includes options of data extracts from current technology systems.
 - Today's session specifically focuses on definitions of Participant Health Data Elements.
- The Standards for Success Pilot does not include:
 - Performance benchmarks
 - Financial reporting at the Grant level
 - Submitting Personal Identifiable Information (PII) to HUD
- Your responsibilities as a Grantee include:
 - Maintaining Data Integrity - Ensuring that data is collected accurately and consistently
 - Consistency in the data collected will allow the opportunity to look for trends and changes, and
 - Maintaining data integrity also benefits Grantees as it helps ensure your work is accurately represented.
 - Collecting Data – Gathering and inputting information
 - Reporting Data – Submitting data for informational summaries. HUD will report-out only aggregate data.
 - As you can see from the timeline at the bottom of the slide, all of you are actively collecting data on each of the Participants in your program. In the Pilot, you will submit this data to HUD for reporting purposes beginning October 1, 2017. The data will need to be submitted by October 30th, 2017.
 - Protecting PII –No personally identifiable information will be reported to HUD.
 - Providing Feedback – Providing feedback for refining the Standards for Success framework to best serve your Participants' and your needs

Page 7: Participant Centered Data Elements

- To review, the Standards for Success Indicators and related Data Elements are organized in the focus areas pictured in this graphic.
- Previous sessions have focused on the Grant Award and Participant Descriptive data elements, pictured at the bottom of this graphic. The data elements pertaining to Participants' Employment and Financial situations, represented in the circles, were covered in the last virtual conference.
- Today we are focusing on the Health Data Elements, pictured in the circle on the bottom left of the graphic.

Page 8: Highlights of Virtual Conferences

- All Grant Award and Participant Descriptive data elements apply to all grants.
 - The new InForm tool and some data management tools will automatically populate select Grant Award data elements.

- In addition, your Notice of Award is an important source for Grant Award information. All the information you need to collect on Grant Award data elements is in your Notice of Award.
- Other data elements may not apply to all Grants.
- Each Participant will have a unique Person Identifier assigned by the Grantee.
- The Data Collection Date is collected for every piece of information gathered regarding Participants.
- For most questions, Participants are not forced to provide an answer. Therefore, response options include:
 - Individual refused
 - Individual does not know
 - N/A
- HUD very recently introduced a new response option. For all the elements with "N/A", there is now another option labeled "Information not collected". In some programs, a service coordinator may not get the opportunity to inquire about a data element. It is not a situation where the individual refused. So, where you see N/A, know that HUD is adding the option "Information not collected."
- Select services may be received:
 - Directly through a grant;
 - Through a grant – facilitated service; or
 - Both

Page 9: Data Elements – Participant Health Data Elements

- The focus area Participant Health Data Elements will be explored in this session.

Page 10: Health Data Elements – List

- There are 23 Participant Health Data Elements.
- These Health Data Elements pertain to individual Participants.
- Each Program has processes in place to protect the privacy of Health data for which we support and encourage.
- In the Standards for Success framework, HUD does not ask Grantees to report any personal health or other Personal Identifiable Information.

Page 11 Health Data Elements – List (Continued)

- With Health having 23 data elements, you can see the list is represented in 2 slides.
- The Data Elements that we discuss today are not collected by all Grant Programs.
- Some Super Quick reminders: There are several options to identify if a data element should be collected for your program:
 - First, the new InForm tool will only present Data Elements relevant to your program and the case management tool you currently use may also have that functionality.

- HUD reports it is nearing completion and should be available in the near future. HUD will notify you when it is available for use.
- Reference information to identify if a data element applies to a grant program include the:
 - Data Integrity Reference Manual
 - Shortcuts
 - Quick References
 - Participant Record Level Information Chart
- Let's get started with the explanation of each of the Participant Health Data Elements

Page 12 Supplemental Nutrition Assistance Program (SNAP) Code

- Food and nutrition are key components of health. The first data elements we will discuss today are if a Participant receives Supplemental Nutrition Assistance Program (SNAP).
- Supplemental Nutrition Assistance Program (SNAP) offers nutrition assistance to low income individuals and families. To get SNAP benefits, households must meet certain tests, including resource and income tests.
- As of Oct. 1, 2008, Supplemental Nutrition Assistance Program (SNAP) became the new name for the federal Food Stamp Program. These benefits are from the Department of Agriculture. Applications are handled through State and county offices.
- SNAP is the federal name for the program. State programs may have different names.
- Households can use SNAP benefits to buy:
 - Foods for the household to eat
 - Seeds and plants which produce food for the household to eat.

Page 13 Temporary Assistance to Needy Families (TANF) Codes

- Temporary Assistance for Needy Families (or TANF) is a federally funded program that provides financial assistance to low income families that have children and for women in their last three (3) months of pregnancy.
- Qualified individuals receive cash or other support services under TANF through the Department of Health and Human Services.
- TANF is federally funded but administrated by each State. Individuals apply for TANF benefits at their local or county welfare office.

Page 14 Food and Nutrition Service Code

- Next, we will transition to Food and Nutrition Service Code.
- This data element identifies a Participant who received food and nutrition services to prevent a period of hunger or malnutrition.
- Food and nutrition services include the:

- Women, Infant, and Children (WIC) program;
- Congregate meal services such as Meals on Wheels;
- Emergency food programs; food banks;
- Grocery shopping or cooking services;
- Donated food items from family, friends, individuals, and other resources in the community; or
- Receiving donated food items from community-based sources.
- The food and nutrition services data element does *not* include SNAP.

Page 15 Hypothetical Example – Meeting of Service Coordinators

- For our presentation today, we will be referencing the meeting of two service coordinators in a program funded by a discretionary grant in Atlanta, Georgia. Kathy has over seven years' experience as a service coordinator. John is new to his role, having been recently hired two months ago. Kathy remembers the days of being a new service coordinator and offered to help John. John is eager to take Kathy up on her offer. Let's listen in on their discussion.

-
- Kathy – Hi John, how are things going?
 - John - In general, I am well. I enjoy my new job. The staff here has been very welcoming. The workload seems substantial to me. There is an awful lot to learn. Is that usual?
 - Kathy – Oh yes, that is not unusual. It can feel like drinking water from a fire hose.
 - John-I frequently feel pulled in so many different directions, with so many urgent needs to address. My “to do” list is very long!
 - Kathy – I know what you mean. There is not a day that you do not feel needed!
 - John – On top of working with the residents, or Participants, there is the paperwork, the recordkeeping. It is hard for me to find or make time to record the information.
 - Kathy – I understand your struggles. It is very difficult to find time for keeping the data and information in files current. I don't know if this will help you, but I remind myself that keeping accurate and current data regarding the Participants is a way of communicating how many people I have served and who they are, and the number and frequency of services delivered. It's a way to document and communicate the hard work we do.
 - John – I see what you mean.
 - Kathy – In addition, HUD, the agency that awarded our discretionary grant, uses the aggregated data when they go to Congress to request funding. We definitely have an interest in funding!
 - John- Definitely!
 - Kathy – By the way, HUD, calls their new data collection and reporting framework for its discretionary grants, Standards for Success. John, if it is any consolation to you, we are not required to collect all the data elements that HUD has identified. The number we collect is less than the total number that exist.
 - John – Data element?

- Kathy- Data elements are pieces of information, such as if a Participant received a specific service; if you assisted the Participant in receiving a service; or something about the status of a Participant.
 - John – Oh, OK. That reminds me, there are some data elements that I could use some help in making sure I understand them. Do you have a few minutes for me to ask you a few questions?
 - Kathy – Yes. Which ones are you thinking of?
-

- In a few minutes, Kathy and John will discuss how some of these data elements may be portrayed and how you would go about recording data in each situation.

Page 16 Health Coverage Code

- Let's look at the data element, Health Care Coverage Code.
 - Identify if the Participant has public or private health insurance.
 - If the Participant has insurance, identify the organization that provides the insurance.
 - As you can see in the Response Options box, there are several sources for insurance.
 - These will be covered in more detail in Kathy and John's conversation that follows.
 - As you know, this information and additional details regarding each data element are found in your Data Integrity Reference Manual. Information regarding Health Coverage is found on page 93.
 - Insurance may be purchased by either the Participant or by any family member on the Participant's behalf.
 - Participant is considered uninsured if they only have specialized coverage such as accidents or dental care, or if they don't have insurance at all.
 - The conversation between Kathy and John can tell us more about this data element.
-

Page 17 Health Coverage Code

- John – Kathy, one of the data elements that I could use some help with is Health Care Coverage Code. I have been on my parent's policy until I started this new job, so I am not familiar with different types of insurance. Can you help me out with that?
- Kathy – Sure.
- John- I understand that I should ask the Participant if the Participant has health insurance and if yes, what organization provides the insurance.
- Kathy – Correct. We record the information that the Participant provides. Some people call this self-identified information.

- John – Sometimes the person doesn't know what type of insurance they have. If I understood the various organizations providing insurance, I might be able to help them identify it.
- Kathy-Insurance can be complex but I can give you a quick summary of the various types of coverage that are identified as options for us to record. Will that help?
- John-Yes, that is a good starting point.
- Kathy – Participants can have health insurance through their employer, which they will sign up for through their workplace. The insurer in this case is up to the employers. Unions can offer a similar arrangement.
 - Participants can also purchase their own insurance through insurance companies.
 - Medicare is a very popular insurance policy in the elderly population. Medicare is for people age 65 and older, or for people under 65 with certain disabilities and is administered by the federal government.
 - Medicaid is different from Medicare. Medicaid is offered to eligible low-income adults, children, disabled people, and some elderly. It is administered by the state.
 - TRICARE and other military health care policies are administered to those who are eligible for military health care benefits. This is a health benefit program for all seven uniformed services: Navy, Marine Corps, Air Force, Coast Guard, Public Health Service, and the National Oceanic and Atmospheric Administration.
 - VA health care is given to someone who served in the active military service and was discharged under any conditions besides dishonorable. They are recognized as veterans.
 - The Indian Health Service is the health care system for federally recognized American Indian and Alaska Natives in the United States.
 - Participants may also choose to not have health coverage.
- John- Wow, I didn't realize how many different organizations offer health insurance. That really helped clear it up though, thanks Kathy.
- Kathy – Also, remember, for most data elements, an individual is not required to provide an answer or they may not know an answer. In that case, you can always enter:
 - Individual refused
 - Individual does not know
- John-Let me run a situation by you, I work with a Participant with limited income who said she has coverage funded by the government. She says she goes to specific doctors and clinics that accept Medicaid. She tends to jump from subject to subject when I talk with her so it is sometimes hard to follow her conversation. Understanding more about insurance helps me to understand she has Medicaid. I ended up asking her directly which organization provided her insurance.
- Kathy – Great. Glad this helped. One more thing, if a Participant has an insurance card, it identifies the organization providing insurance. This is another way to help the Participant identify which, if any organization, provides their insurance.

- As you can see, Kathy and John’s discussion shows that option 4, Medicaid/Medical Assistance is the response option for this situation

Page 19 Primary Health Care Provider Code

- Now, on to data elements addressing additional components of health care.
- For the Primary Health Care Provider Code, identify if the Participant has a health care provider. The health care provider can be a general doctor, specialist doctor, nurse practitioner, or physician’s assistant.
- Also, the Participant needs to have completed an appointment with a health care provider in the prior three (3) years.

Page 20 Medical Examination Status Code

- Next, we will touch on the Medical Examination Status Code.
- Identify if the Participant received a routine medical examination by a health care provider in the prior twelve (12) months such as a wellness visit.

Page 21 Disability Status Code

- The Disability Status Code identifies a Participant who is disabled as defined under the Americans with Disabilities Act of 1990 and pre-determined by a physician, Medicaid, or other authority.
 - You can find out more about this on page 84 of the Data Integrity Reference Manual.
 - For this data element, an appropriate authority must determine that an individual is disabled as defined in ADA.
 - A Participant is considered disabled if:
 - The Participant has a physical or mental impairment that substantially limits one or more major life activities such as caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, talking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working; or
 - The Participant has a record of such impairment.
 - In our hypothetical example, John encountered this situation. We will listen to his experience.
-
- John – Kathy, can I ask you about the data elements related to disability? I am not clear on when someone is considered disabled or not. Several people tell me they are disabled and primarily talk about their limitations when I ask them about their disability.
 - Kathy-In order to respond “Yes” for the Disability Status Code, the disability must meet the definition of disabled under the Americans with Disabilities Act (ADA) *and* an appropriate authority, such as physician or Medicaid, must determine the individual meets that definition. It is not something that the Participant, you, or I can assess or declare.
 - John – I see. If someone is waiting to hear a decision about a disability, do I record them as disabled?

- Kathy-No, the physician, Medicaid or other authority must complete the determination that the person is disabled as defined by the ADA.
 - John – That would be the case of a Participant who told me that Social Security has determined he has a disability based on his depression. He really has challenges, including difficulty with some basic activities related to everyday living. I could easily spend ½ a day a week just on his case management. He is an individual where the response option would be yes.
-

Page 22 Disability Status Code

- After hearing from John and Kathy’s discussion, we know that the correct response option for the individual determined by Social Security to be disabled due to depression is option 1, yes, individual indicates a disability as defined in ADA.

Page 23 Disability Category Code

- A related data element is the Disability Category Code.
- This identifies a Participant who has a physical disability of mobility and sensory impairments or a mental disability of cognitive and learning impairments.
- It also includes a Participant who has both physical and mental disabilities and the response option of N/A, not applicable, if an individual does not have a disability.

Page 24 Disability Category Code

- For the example in John and Kathy’s last discussion, we heard John mention that the Participant’s disability is based on depression, a mental disability. As you can see, option 2, impairment is primarily mental, including cognitive and learning impairments, is the appropriate response.

Page 25 Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADLs)

- John also mentioned to Kathy that the Participant has difficulty with some activities related to everyday living. Specifically, the data elements of Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs).
- First, we will discuss Activities of Daily Living or ADLs.
- What is included in ADLs? As a reminder, if this gets a bit confusing you can always find these definitions as well as other data element details in your Data Integrity Reference Manual.
- ADLs include:
 - Eating: Participant can feed themselves but needs assistance with cooking, preparing, or serving food
 - Bathing: Participant can wash themselves but needs assistance getting in and out of the shower or tub

- Grooming: Participant can take care of their personal appearance but may need assistance in washing their hair
 - Dressing: Participant can dress themselves but may need occasional assistance with buttons, etc.
 - Transferring: Participant can go from a seated to standing position or get in and out of bed
 - As well as any other activities HUD deems essential for maintaining independent living
- For the ADLs, identify a Participant who if assessed demonstrates the need for assistance in completing one or more ADLs and then count how many ADLs the Participant cannot perform.
- Who assesses ADLs and IADLs? “A professional with trained expertise” does the assessment. This does not necessarily mean a “medical” professional. It may be the service coordinator. It is not the Participant making a self-assessment, or self-identifying. ADLs and IADLs are data elements where self-reporting or self-identifying are not accepted.
- So, what is the data element Instrumental Activities of Daily Living or IADLs?
- IADLs activities are more complex than ADL activities. They involve both mental and physical needs, and include:
 - Handling personal finances;
 - Meal preparation;
 - Shopping;
 - Traveling;
 - Doing housework;
 - Using the telephone;
 - Taking or managing medications; and
 - Any other activities HUD deems essential for maintaining independent living
- Similar to ADLs, identify a Participant who if assessed demonstrates a need for assistance in completing one or more IADLs and then count how many IADLs the Participant cannot perform.
- Let’s see how this applies to John and Kathy’s work.

-
- John –Kathy, I mentioned a Participant who has a disability of depression. He really struggles, including with activities required for everyday living. I understand we are supposed to count and report the number of activities that a Participant needs assistance with. Can you tell me more about that?
 - Kathy – You are correct. We do count activities and there are two types, Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADLs).
 - John – How am I supposed to know and remember what are Activities of Daily Living and Instrumental Activities of Daily Living?

- Kathy – Oh, they are explained in detail in the Data Integrity Reference Manual and in the Participant Record Level (PRL) Chart. A copy of the Participant Record Level Chart is in the appendix of the manual.
- John- I've received so many documents since I started work. I hope I can find the Data Integrity Reference Manual.
- Kathy – You can always access electronic copies of the documents. I have access to electronic copies of the Data Integrity Reference Manual from virtual conference training sessions in which I participated and from e-mails from HUD. In addition, HUD is establishing an electronic portal for information regarding Standards for Success. The manual and other reference materials will be available on the portal. HUD indicates the portal will be available in the near future. Would you like for me to e-mail a copy of the manual to you?
- John – Yes. Thanks.
- Kathy– Let's look at the manual and maybe work through an example.
- John – That would be great! Maybe you could help me determine what data I need to collect for the Participant who I just mentioned. His depression can be severe. It impacts his appetite, cooking for himself. He also does not stay within his budget. He runs out of money before the end of the month.
- Kathy – Looking at the Data Integrity Reference Manual, Activities of Daily Living are explained on page 90 of the Manual.

Page 26 How many activities of daily living are you unable to perform?

- John – OK. Listing out the ADLs, I know the Participant was assessed and demonstrates he is not able to perform functions related to eating. He is able to perform the other ADLs. So, the count for ADLs must be 1.

Page 27 How many activities of daily living are you unable to perform?

- As you can see, John enters the number 1, for the number of ADL's the Participant is unable to perform.
- I think John had something else to say – John?

Page 28 Instrumental Activities of Daily Living (IADL) Count

- John – Now onto the IADLS. The assessment showed the Participant was unable to handle his finances and prepare meals. Assessment of shopping, doing housework showed he is able to do those. Also, using the telephone and taking his medications checked out as activities he is able to perform. That means the total count of IADLs the Participant is unable to perform is 2.
-

Page 29 Instrumental Activities of Daily Living (IADL) Count

- In this situation, the Participant was unable to handle personal finances and unable to complete meal preparation services, the appropriate response option is the number “2”.
- The discussion regarding Activities of Daily Living and Instrumental Activities of Daily Living does not end here.

Page 30 Adult Personal Assistance Code

- This graphic shows us the relationship between activities and support services when Participants demonstrate a need for assistance to complete certain activities. These activities could be ADLs or IADLs, which we just discussed.
- Codes for Support Services include the Adult Personal Assistance Code which refers to the identification of a chronically ill or disabled Participant who received ADL or IADL services from a non-residential facility that supports the health, nutritional, social support, and daily living needs of adults in a professionally staffed, group setting.
- Non-residential facilities include adult day care centers and adult day services.
- Participants may receive Adult Personal Assistance Services based on any activities the Participant is unable to complete in ADL Count and IADL Count.

Page 31 Disability Requires Assistance Code

- Did you think we were through with ADLs and IADLs? Not just yet.
- The Disability Requires Assistance Code identifies a Participant who is disabled and requires ADL and IADLs services.
- If a person is disabled, did they require assistance with:
 - Eating
 - Bathing
 - Grooming
 - Dressing
 - Transferring?
 - Or with the more complex IADLs?
- You can also identify if a disabled Participant was not assessed for this criterion.
- Once again, there is also the response option of N/A, not applicable, if an individual does not have a disability.
- Let’s return to John and Kathy.

-
- John – Kathy, earlier in our conversation I mentioned the Participant with a disability due to depression had trouble with activities related to everyday living. I now see the implications for the data element, Disability Requires Assistance Code. This Participant is an example of where the response option is 1, the disabled individual requires services to manage home activities, correct?
 - Kathy – That’s correct.

Page 32 Disability Requires Assistance Code

- John and Kathy’s conversation provides a good example of how option 1, the disabled individual requires services to manage home activities, is the correct response option.

Page 33 Translation/Interpretation Service Code

- Translation/Interpretation Service Code is straightforward.
- You identify if a Participant received translation or interpretation services because the Participant has limited or no English-speaking ability, or has visual or hearing impairments.
- This data element is an example of response options that include: “services may be received:
 - Directly through a grant;
 - Through a grant – facilitated service; or
 - Both

Page 34 Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code

- The Acquired Immune Deficiency Syndrome (AIDS)/Human Immunodeficiency Virus (HIV) Status Code identifies a Participant who was diagnosed as being infected with AIDS, HIV-1, or HIV-2 by a health care provider.
- It can be associated with the HIV/AIDS Service Code.

Page 35 HIV/AIDS Service Code

- This code identifies a Participant who received HIV/AIDS health and counseling services such as access to treatment; financial assistance for medical treatment and medications; and assistance in securing housing

Page 36 Mental Health Service Code

- The Mental Health Service Code is next. Identify if a Participant received mental health services from a psychiatrist or credentialed psychologist, therapist, or other mental health counselor
- Mental health services include individual and group counseling and medication.
- This can involve dealing with the loss of a loved one, having issues within interpersonal relationships, and mental illness.

Page 37 Substance Abuse Service Code

- The Substance Abuse Service Code identifies a Participant who received substance abuse services for use of addictive substances such as tobacco, alcohol, and drugs (prescription and street).

- The individual may be being treated by a medical professional or a treatment facility for substance abuse or dependence. Substance abuse is defined as a maladaptive (or harmful to a person's life) pattern of substance use marked by recurrent and significant negative consequences related to the repeated use of substances. These substances may be legal, such as alcohol, or an illicit drug such as hashish, cocaine, hallucinogens, heroin, or prescription-type drug used non-medically.
- Volatile substances are also considered materials used in substance abuse and may be defined as the deliberate inhalation of volatile compounds to produce psychoactive effects. Examples include glue, lighter refills, and spray air fresheners.
- You can see that some forms of Substance Abuse Services overlap Mental Health Services. Standards for Success defines others, such as smoking cessation or Alcoholics Anonymous (AA), as occurring outside of Mental Health Services.
- For example, if the purpose of treatment is to address depression, bipolar disorders, anxiety disorders, it is a mental health service code.
- If the purpose of services from a mental health worker is to treat substance abuse such as alcoholism or heroin addiction, it is a substance abuse service code.
- If someone is receiving services for schizophrenia and heroin addiction, they may receive both mental health services and substance abuse services.

Page 38 Substance Abuse Treatment Code

- Note that the response options for Substance Abuse Treatment Code have a time element to them. The first response option, Response Option “1 = The individual is being treated for substance abuse or dependence.” Refers to the present time. The individual is currently being treated.
- Response options 2 and 3 refer to treatment in the past.
- How might this play out in John’s work?

-
- John- Kathy, can you tell me a little bit more about how we offer substance abuse services to Participants?
 - Kathy- Sure, I am glad to. We can offer referrals to substance abuse treatment services for our Participants. Some grants can even offer services directly through their program.
 - John- What kind of substance abuse services are there to offer Participants?
 - Kathy- There are services for almost any type of substance abuse that will help our Participants with recovery.
 - John- So, I have a Participant who came to me with an interest in joining AA meetings. My specific grant does not offer those services directly, so I referred this Participant to a local AA meeting , which the Participant has been involved in for a month or two now. From the information you gave me, my Participant received service through grant-facilitated referral.
 - Kathy- That is correct, John.
-

Page 39 Substance Abuse Service Code

- As you heard, the Participant did receive service through grant-facilitated referral. John and Kathy were able to discuss this which gives us better clarification to why option 2 is most appropriate.

Page 40 Asthma Condition Code and Asthma-related Emergency Room Visit Code

- Starting with the Asthma Condition Code
 - Identify if a Participant was diagnosed with asthma by a health care provider.
- The Asthma-related Emergency Room Visit Code
 - Identify if a Participant who has asthma was treated in a hospital's emergency room or if the Participant was hospitalized due to an asthma-related condition in the prior twelve (12) months.

Page 41 Blood-Lead Test Code and Blood-Lead Test Result

- Blood-Lead Test Code and Blood-Lead Test Result
- For these data elements, HOPWA, ROSS, Multi-Family Service Coordinators (MFSC) and Budget-based Service Coordinators get a pass.
- Looking at the “Applies to Grants” box for these two data elements, you see that the letter “N” representing “No” to the right of HOPWA, ROSS, MFSC and Budget-based Service Coordinators. Blood-Lead Test Code and Blood-Lead Test Result data elements do not apply to these grants.

Page 42 Medical Care Service Code

- The final data element in Health is Medical Care Service Code, a data element with a broad definition, including many health care services.
- Here you identify a Participant who received medical or health care services related to physical health from a physician, nurse practitioner, physician's assistant, dentist, dental assistant, credentialed nutritionist or another health care provider
- Medical or health care services include prescription medication and medication management; dental services; home health services; receipt of durable medical equipment and other adaptive equipment; and nutrition therapy.
- Note this data element also includes lifeline programs that provide a discount on monthly telephone services to low-income households.
- Medical Care Service Code refers to care for physical needs. It does not include Mental Health Services or Substance Abuse Services for psychological or mental needs.
- John and Kathy are wrapping up their conversation as we reach the end of our discussion of health-related data elements.

-
- John – Kathy, I sure appreciate the time and information.

- Kathy – No problem. I am glad to help. If you have a question and I or someone else is not available to help, HUD welcomes questions. HUD also wants our feedback regarding the Standards for Success framework, methodology and tools. HUD is interested in refining the Standards for Success framework to best serve our Participants' and our needs.
 - John – You also mentioned training, is that right?
 - Kathy – Yes, those are the virtual conferences that HUD offers monthly. In addition, HUD will provide 5 computer based training modules.
 - John – Great! Thanks again, Kathy.
 - Kathy – You are welcome.
-

Page 43 Summary

- This wraps up our discussion of health-related data elements. To summarize:

Page 44 Summary

- No Personal Identifiable Information is reported to HUD.
- The Health Coverage Code includes identifying: (1) if the Participant has insurance; and (2) the organization that provides the insurance.
- Data elements identify if the Participant:
 - Has a primary care provider;
 - Received a routine medical exam by a health care provider; and
 - Received medical services and mental health services
- Select Substance Abuse Services are also Mental Health Services.
- The Activities of Daily Living (ADL) Code and the Instrumental Activities of Daily Living (IADL) record the number of activities the Participant cannot perform at the time of assessment.

Page 45 Questions and Answers

- We welcome your questions and feedback! Contact HUD by e-mail at askgmo@hud.gov to:
 - Provide feedback regarding the Standards for Success framework, methodology and tools;
 - And to Submit questions; it can be helpful to identify your Grant Program with the question as clarifying information.

Make sure to Include Standards for Success in the e-mail's subject line. For those of you who are watching this recorded presentation independently, HUD offers recordings of its Q&As that occur at the end of their conferences.

- In addition, you have the Frequently Asked Questions reference sheet.
- For those of you participating in a group virtual conference on Adobe Connect, we will respond to questions that were submitted during the presentation.
- I will ask my StrategyGen colleagues, Bridget Booth and Soulis Lindsey-Pangalos to help with the answers to your questions.