



Data Collection Options for COVID-19 Vaccines

Introduction and Purpose

The U.S. Department of Housing and Urban Development (HUD) is providing data collection recommendations to communities and vendors alike for COVID-19 vaccinations for persons experiencing homelessness as a timesaving effort and to allow for uniformity should community data need to be rolled up for reporting across multiple communities. Vaccination activities should be addressed with the easiest and most effective approach for the community.

Using the Homelessness Management Information System (HMIS) as a supplementary data collection strategy may help communities provide and measure equitable access to the vaccine by Black, Indigenous, and people of color, who are becoming more severely ill and dying from COVID-19 at disproportionately higher rates than white people. Research on the social determinants of health and barriers to adequate healthcare point to factors reinforcing this trend.

Guiding Principles

- Projects funded with Emergency Solutions Grants program Coronavirus Aid, Relief, and Economic Security (CARES) Act (ESG-CV) are prohibited from requiring treatment or other prerequisite activities as a condition for receiving shelter, rental assistance, or other services provided with ESG-CV funds (see Section F.10. of the [ESG-CV Notice](#)).
- Vaccination status should never be a factor in any housing prioritization.
- Client participation in data collection must be voluntary and in no way impact their access to services.
- If your community does not have a specific need or use for this data, do not collect it.
- HUD does not plan on requiring recipients to report vaccination data as part of its official reporting requirements. Exercise accountability: if you believe information is being used in an unethical or illegal manner, follow your HMIS Grievance Policy to report the abuse. If there is no Grievance Policy in place, notify your HUD field office.

Rationale

HMIS or other local data systems can be used to:

- Determine how many people experiencing homelessness are willing to be vaccinated,
- Focus community engagement strategies to target people who may be experiencing vaccine hesitancy,
- Remind people who may need their second dose of vaccine, and
- Mitigate ongoing COVID-19 outbreaks in congregate shelters.

Collecting this information does not make a program subject to the Health Insurance Portability and Accountability Act (HIPAA). To learn more about HMIS Privacy and HIPAA, review Chapter 2 of [HUD's Coordinated Entry Management and Data Guide](#) and the [HUD HMIS Data and Technical Standards Final Notice](#) (published in 2004) available on the [HUD Exchange](#) website.

Communities may reasonably opt to use other data management systems while serving and supporting people experiencing homelessness, such as a by-name list or an external coordinated entry system. This document refers to HMIS; however, using other local data collection systems to collect this data may make more sense for your community.

Optional new vaccination data elements will allow communities to use their HMIS to prepare for and support effective and equitable vaccine distribution among people experiencing homelessness. The additional data elements are listed in **Appendix A**.

HMIS Data Collection Approaches

Communities should consult their HMIS vendors for recommendations on data collection configuration and when and how to collect the data to maximize the reporting structure in their software. HUD is encouraging vendors to work with communities to deploy solutions to collect and report this new data. HUD is working to identify ways ESG state recipients can possibly lower associated costs through statewide edits to HMIS. Please attend HUD's Office of Special Needs Assistance Programs (SNAPS) Office Hours for more current information.

1. Universal Project Collection

Communities may choose to add the vaccine screening and status data elements (see Appendix A) to the data collection fields for all existing HMIS-participating projects. While this setup may be time consuming, it integrates the data collection process in HMIS where it may be most seamlessly incorporated into the existing data collection infrastructure.

2. New Project Setup

Communities may choose to establish a separate project in HMIS to help their communities record COVID-19 vaccination data. The following Project Descriptor Data Elements (PDDE) should be used:

- 2.01 Organization Information—may use an existing HMIS organization or create a new one
- 2.02 Project Information—data element responses:
 - Project Name & Operating Start/End Date, determined locally per HMIS Data Standards
 - Continuum Project = “No”
 - Project Type = “Other”
 - HMIS Participating Project = “Yes”
 - Target Population, determined locally per HMIS Data Standards
- 2.03 Continuum of Care Information, determined locally per HMIS Data Standards
- 2.06 Funding Sources, determined locally per HMIS Data Standards

3. Coordinated Entry

In addition to collecting information on people in congregate settings and unsheltered locations, communities utilizing their HMIS for a Coordinated Entry Assessment and by-name list generation may also elect to incorporate the new data elements into the Coordinated Entry Assessment. This would allow them to add collecting and reviewing immunization screening and/or vaccine status to an existing framework.

HMIS Data Collection Recommendations

- Communities should not wait for HMIS to be updated with these elements and should collect data in real time, by some other means, until they are able to enter data directly into HMIS.
- Be accountable: Ensure that data collection procedures identify which agency/project is responsible for following up with clients per the community's vaccine distribution protocol.
- Be flexible: Review relevant forms, training materials, and data collection processes and update them as needed to incorporate procedures for collecting vaccine status and screening data. These procedures are being developed and activated rapidly and may require adjustment.

Appendix A

Screening Questions and Responses

Field Name	Dependency	Response Category/Data Type	Descriptions
Are you willing to take the COVID-19 vaccine?	None	No	Client IS NOT willing to take the COVID-19 vaccine (Centers for Disease Control and Prevention [CDC] Vaccine Refusal—Yes)
		Yes	Client IS willing to take the COVID-19 vaccine (CDC Vaccine Refusal—No)
		Client doesn't know	
		Client declined to answer	
		Data not collected	
If 'Yes,' have you gotten the first shot/dose?	Are you willing to take the COVID-19 vaccine—Yes	No	If the client has not begun the protocol, refer for a vaccine.
		Yes	If 'Yes,' go to the vaccine status and review record for follow-up information and protocol status.
		Client doesn't know	
		Client declined to answer	
		Data not collected	
If 'No' to "Are you willing to take the COVID-19 vaccine?" "What is the key concern?"	Are you willing to take the COVID-19 vaccine—No	Believe the vaccine is not safe and may cause serious health complications	
		Believe the vaccine will not work/is ineffective	
		Believe the vaccine is too new	
		Concerns with the vaccine development process	
		Believe they are not at risk of getting COVID-19 or risk is low	
		Believe the vaccine may infect them with COVID-19	
		Concern that vaccination may lower vulnerability score and/or impact access to services	
		Distrust in the healthcare system due to historic and/or current racism	
		Other	Only select the 'Other' response if NO categorical response is a close match to the client's reason for not taking the COVID-19 vaccine.

Field Name	Dependency	Response Category/Data Type	Descriptions
If 'Other' reason not willing to take the COVID-19 vaccine	If 'No,' reason—'Other'	[Text]	Enter the reason the client declines to take the vaccine. Confirm that the reason does not match any of the categorical responses to "If 'No,' to 'Are you willing to take the COVID-19 vaccine?' What is the key concern?"
If 'No' to "Are you willing to take the COVID-19 vaccine?" What would you need to feel safe taking the vaccine?	If 'No' to "Are you willing to take the COVID-19 vaccine?"	[Text]	Enter the measure that would help the client feel safe or more comfortable taking the vaccine.

Vaccine Status Questions and Responses

Field Name	Dependency	Response Category/Data Type	Descriptions
Vaccination Status	None	Vaccination complete	Select 'Vaccination complete' if the client has taken both doses of the vaccine (or one, if it is a brand that only requires a single dose).
		Partial vaccination	Select 'Partial vaccination' if the client has received one of two vaccine doses.
		No vaccination	Select 'No vaccination' if the client has not started the vaccination process.
Dose 1—Date Scheduled	None	[Date]	Record the date the client is scheduled to take the first dose of the COVID-19 vaccine.
Dose 1—Date Administered	None	[Date]	Record the date the client took the first dose of the vaccine.
Dose 1—Location Administered	None	[Community-defined values]	This can either be represented by an open text box or a list of values that are defined by the communities based on the locations being used in their community. Examples could be "Local pharmacy" or "Shelter vaccination clinic."
COVID-19 Immunization Information System (IIS) recipient ID	None	[Text]	
COVID-19 vaccine manufacturer (MVX)	None	[List of vaccine manufacturers]	

Field Name	Dependency	Response Category/Data Type	Descriptions
Second Dose Required?	None	Yes	If the vaccine manufacturer requires a second dose.
		No	If the vaccine manufacturer does not require a second dose.
Dose 2—Date Scheduled	Second Dose Required = Yes	[Date]	Record the date the client is scheduled to take the second dose of the COVID-19 vaccine.
Dose 2—Date Administered	Second Dose Required = Yes	[Date]	Record the date the client took the second dose of the vaccine.
Dose 2—Location Administered	Second Dose Required = Yes	[Community-defined values]	This can either be represented by an open text box or a list of values that are defined by the communities based on the locations being used in their community. Examples could be “Local pharmacy” or “Shelter vaccination clinic.”

Questions or clarifications on how to incorporate any of the above should be directed to the [AAQ on the HUD Exchange](#).