

HMIS Webinar Transcript 4/20/2022

MARY SCHWARTZ: Well, hello and welcome to the HMIS Lead webinar on this April 20th, we're glad you're here. Thank you for joining us, we've got a lot of great stuff to go over today. So, let's get started.

MARY SCHWARTZ: So, I have had a few people email over the weekend and asked me whether they should attend this call or not. So, this call is specifically for HMIS Leads and HMIS System Admins. Those are people that are running the HMIS show in your communities. If you're an HMIS participating agency, you enter client data into HMIS and contribute to the CoC data conversation, you are welcome to stay. This is an open forum, anyone can be here, but our meeting and the agenda items that we're going to cover are really focused on the role of HMIS Leads and System Admins in your communities, those that are operating and maintaining those HMIS softwares.

MARY SCHWARTZ: We go over broad overviews of HMIS guidance and foundational HMIS knowledge, trying to do a nice mix of expertise and foundational kind of material. We get HUD updates from Fran that are pertinent to HMIS Leads. It may be that you're a CoC lead and want to stay connected to the data conversation with your HMIS Lead. That's great. We also are going to talk a little bit about victim service providers today and how to engage them. They're welcome to come to this session as well.

MARY SCHWARTZ: We are generally focused on helping hand out all the right information for HMIS Leads to do their job, HMIS Leads and System Admins to do their job. And if you are one of those folks that that information will be relevant for, we are happy to have you here. So, let's get started.

MARY SCHWARTZ: We are in a Webex where you all stay muted. Only the panelists that you see on camera here will have speaking roles. But you are welcome to use the Q and A feature, it's on the right-hand side of your screen, to type in any question you need, and we'll try and answer everything while we're on the call. If we can't answer your question while we're on the call, we'll ask you to submit an HMIS, and that's a good route to take. We can get answers out to you fairly quickly after the call if we have them in the AAQ format.

MARY SCHWARTZ: There's that HMIS Lead page that all of the recording transcript, slide deck, and the full Q and A, those 4 things are posted as soon as possible after this call ends today to the HMIS Lead webinar website. That's the place that you signed up for this listserv and the same place you went to click on the link to get into this call. Down at the bottom of that page is all the past materials going back to 2018, I believe.

MARY SCHWARTZ: So use that, go access that material when it's posted, use the HMIS AAQ to interact with us over the month. And if you don't get an answer today for your question, use HMIS AAQ to follow up. But we are definitely interested, and this is a time for you to submit your questions to us while we go through our material today.

MARY SCHWARTZ: On the call, Fran Ledger, they use they and she pronouns, from the SNAPS office. Meredith Alspaugh uses she and her pronouns from the Partnership Center. Genelle Denzin, she/her pronouns from Abt Associates. Jesse Jorstad uses he/him pronouns from Abt Associates. I'm Mary Schwartz, she/her pronouns From Abt Associates. And we have Jeanne here in the background helping us with tech support today, she/her pronouns and we're very happy to have all of you on the call as

well, which we could go around and do introductions for everyone who's participating but. There's around, it looks like 375 of us today so.

MARY SCHWARTZ: We will have plenty of time, though, for reporting timeline updates. We also have an ESG-CV quick notice, slide to go through. An NHSDC debrief, going to get some feedback from you on that. We'll do a deeper dive today into again some communication reminders about this webinar in particular talking through a comparable database information. We'll do some background check clarification from last month's security call.

MARY SCHWARTZ: VSP coordinated entry, that's victim service provider coordinated entry information, Meradith is going to go into. We'll look at the HMIS data standards timeline and how you can participate in HMIS data standards work. And then finally we'll end with a couple of new resources that were recently posted on the HUD Exchange. HMIS Lead Standards, which Genelle will walk us through today. And Dual Enrollment and Duplicative Inventory Guidance which I will do a quick preview of.

MARY SCHWARTZ: Fran, take it away for announcements and reminders.

FRAN LEDGER: Okay everybody, I'm so excited that you're here today and thank you for all the work that you do.

FRAN LEDGER: We just had an ESG-CV update. So, there's, the notice is out, and we just put up on the slide here just a few things around the date. You can go to that notice, the link's on the slide, and read the full information, but really the key piece is that it extends out the date.

FRAN LEDGER: And one of the things to know is that like it extends, you know, the overall, like replaces the 3/31 deadline for an 80%, you know, expending the funds, to 6/16/2022 deadline for 50% draw down. So, it's no longer expending, it's a draw down and then all these other dates that you're seeing.

FRAN LEDGER: So, administration, the HMIS funds necessary for ESG-CV close out must be expended by December 31st, 2023. And there's a lot of other stuff in there to take a look at. So, when you have time, go ahead and there's that. That's good, to the next slide.

FRAN LEDGER: So, we have some reporting timelines. You should all be familiar with this. Two of them are at the end of the month on April 29th, which is the HIC/PIT and RHY upload and then we have the ESG-CV reporting on April 30th. And you see the other information, SSVF and Stellaviza- I can't even say it. You see it there you can get your Stella stuff on. It's available now on HDX 2.0, go check out your stuff on Stella. So important. And I'm sure one of our other fine TA providers can actually say that word.

FRAN LEDGER: And NHSDC, we're actually going to open this up for chat. So, NHSDC conference just happened. Hopefully many of you had an opportunity to go. It was their second in person conference since COVID started, so very excited that people were able to get back together. Hopefully you were all able to do that safely and get back home but had a lot of fun being there and learning some great things.

FRAN LEDGER: We're already starting to think about and plan for the next conference. So, we're opening up the chat for you to put recommendation in for the next conference. I don't have a lot of information about what that's going to look like. But we really appreciate your feedback, and we take it into consideration.

FRAN LEDGER: So, this is your opportunity whether you went or not, let us know what you would like to see in the future conference. If you did go and there was something that you wanted to see different or more of, or something that you that you really liked, just let us know. So, Mary, is the chat open now?

MARY SCHWARTZ: Yes, the chat's open, it looks like. You know what we're requesting we'll just sit here for a second. We're going to give you about 2 minutes to type into the chat. What we're looking for is ideas for next sessions. Not necessarily location suggestions. That's pretty much all decided by the NHSDC board, but more like content. What can we make sure HUD covers during NHSDC that would be helpful to you.

MARY SCHWARTZ: What sessions should be repeated, what sessions should not. If you have experience attending an NHSDC, You get the idea, you know, maybe there was really great things you saw a couple of years ago that we've all forgotten about cause it's been a really long 2 years. Give us those ideas tell us to do more of something, less of something. Just what are your great thoughts on what we should, what HUD should consider for NHSDC topics.

MARY SCHWARTZ: The chats are rolling in and I just, again gonna sit here for a second.

FRAN LEDGER: Yeah, and I'm seeing comments I wish we could choose some of these wonderful places that are getting suggested in the comments, but very much appreciating the comments that are not only about topics, but logistics too, cause that's also helpful.

FRAN LEDGER: We live streamed a whole set of the HUD sessions this conference. We've done it when in the past, when we've had HUD sessions at NHSDC. And we'd like to continue to do that. I think it's very helpful for folks that can't actually be present at the conference just to be able to see those sessions. And then we record them and put them online. So, anything around logistics is also helpful to know.

MARY SCHWARTZ: Somebody just said anything that is both live and virtual at the same time. I think that's kind of what ended up happening this last time. There were people in the room and the live session with streaming. We did notice there was some technical hiccups with that so we'll keep thinking about how to make that as good as possible, as functional as possible.

FRAN LEDGER: Yeah, I think there's definitely room for refining what we're doing.

MARY SCHWARTZ: So, if the virtual and in person thing happens at the same time, so just, it's kind of like this call where we don't, the slides aren't sent out until after the presentation is done and so it's often pretty hard to have the slides at the same time as the live session. But, yeah, any kind of slide-based improvements we can make, we'll think through, it's a good suggestion.

MARY SCHWARTZ: This is great. Okay. We're going to wrap it up in, like, 30 seconds. So, hurry and finish your typing. We're going to close down the chat again.

MARY SCHWARTZ: And 5, 4...

FRAN LEDGER: So click submit.

MARY SCHWARTZ: Click submit! Yeah. Okay, I think we can close it down, Jeanne. Thanks everybody for your feedback. Fran, keep on going. I'll go on mute.

FRAN LEDGER: Thank you so much, thank you so much for doing that. Much appreciated. Okay.

FRAN LEDGER: I'll go into a deeper dive. So, I want to do some level setting around communication and I'm sure, you know, many of you do this naturally. But I just want you to hear it from HUD, encouraging you to take back the information that you're hearing on this call to your CoC boards, to leadership that are involved in, you know, information, you know, using information for decision making.

FRAN LEDGER: Take this information back to victim service providers that are not participating in this call but are responsible for comparable databases, that are getting set up in your community or being managed and your community. The information on this call is really helpful, and we just want to make sure that it's actually making it out there.

FRAN LEDGER: It's also, you know, if you have those folks, like, you have a victim service provider, that's managing a comparable database, it's totally appropriate to have them be on this call. There's content on this call that is relevant to them.

FRAN LEDGER: So be thinking about is, are there other people that actually would benefit from being on this call and getting this content. You hear at the beginning of the call Mary kind of run through who is the appropriate audience for this call? So, you know, if that's somebody else in your community, and they should join, please, you know, have them join this call. I would love that.

FRAN LEDGER: If there are people that could benefit from some of this knowledge that's being shared, make sure you take that back to your community and share that. Appreciate you being here and spreading that knowledge out.

FRAN LEDGER: So the other thing that I want to talk about is comparable databases specifically. And some things we're going to be shifting about the, you know, the work we're doing on this call around comparable databases and wanted to start with this 1st block and that we're going to continue to ground the conversation in survivors of domestic violence and victim service providers.

FRAN LEDGER: In all the work we do, we want to make sure that our most vulnerable people that we're serving, that have the highest risk of lethality, and our, and we never know who those folks are in our communities. Right? They don't always just show up in the victim service provider organizations. They may show up in any number of organizations within our community seeking housing and safety.

FRAN LEDGER: So, we want to make sure that when we're having these conversations, we're constantly thinking about what are the things we need to do to keep people safe. And to manage the information in a way that's appropriate. And so, you know, that has to be kind of the first thing when we're making decisions. We think about that when we're making decisions around the data standards, how we manage the configuration of systems, how we approach privacy and confidentiality.

FRAN LEDGER: The next thing we want to do is we want to shift the comparable database conversation so it's not just like a standalone one slide at the beginning of the call. It'll get an integration into the conversation largely through the, through the whole stream on the call.

FRAN LEDGER: So, if we're on a topic that's very much HMIS centric, that is not a comparable database centric call, like the LSA submission, right? That does not involve a comparable database. Then we won't have that conversation in the context of comparable database. But if it's about coordinated entry, which you'll hear about in just a few minutes, it will very much have conversation about comparable database, victim service providers.

FRAN LEDGER: So we're gonna do better about being more integrated on the call around those things. So, you know, from this I hope what you're gathering is making sure that you invite the VSP admins of the comparable databases to this call. I think it's very helpful.

FRAN LEDGER: And I think also, I'm hoping that it helps the HMIS system administrators have a better understanding of how they might support and and work with the victim service providers as they, as we kind of model and reflect those things, and the work that we do, and the conversations that we're having.

FRAN LEDGER: I wanted to talk, we had a security conversation last time that we joined, and I just want to touch on a few things for clarification. So, and we're going to put up some resources in the chat in just a few minutes, but background checks are not required in the 2004 standards. And keep in mind those are the standards that we have out there, right? So very old.

FRAN LEDGER: And they did not require a background check. It absolutely can be something that you could add when you're doing a hiring for your HMIS Lead or, you know, whoever's having access to PPI in the system. But HUD strongly suggests is when you're doing your hiring practices that you do that with equity.

FRAN LEDGER: And we know that our criminal justice system is not equitable, right? So, we have a lot of issues with our criminal justice system. And so, when you're doing background checks there's some inherent issues in that. And so, you should be very careful and mindful about how background checks are conducted and approached.

FRAN LEDGER: And so, we think that the documents that are getting close to up can be helpful when you're thinking about hiring practices. They're not completely 1 for 1 but there's a lot of good content in there that I think it'd be helpful across the board when you're thinking about hiring and equity.

FRAN LEDGER: But I think specifically about background checks. It's always important to think about, when you're looking at a criminal background check, that that is done after the fact, when you determine whether someone has the qualifications of doing the job and when you're actually looking at what's on a criminal background history, is it actually relevant to the job. How long ago was it? What's the context of it? Having a conversation with people?

FRAN LEDGER: There actually are fair hiring laws in many communities that you have to be aware of. And that there may be some actual, not only best practices, but some requirements that you have to adhere to along those guidelines.

FRAN LEDGER: So, that came up. There was a lot of questions that came up in the question and answer. So I just wanted to throw that out there. And give you some things to think about around that.

FRAN LEDGER: You can always submit a TA request if you want additional guidance or have questions. Or submit a question to the HMIS AAQ.

FRAN LEDGER: And, and I can, we'll switch over and I'll be able to answer questions. Mary, did anything come in that I should address?

MARY SCHWARTZ: Nope, you're good.

FRAN LEDGER: Okay. So, I am going to turn it over to Meradith. Thank you.

MERADITH ALSPAUGH: Thank you Fran. Hi, everyone. Thank you all again so much for being here today.

MERADITH ALSPAUGH: We're going to talk just a little bit about coordinated entry and victim service providers, VSPs. We're bringing this topic up today because we've had quite a few questions sort of bubble up over the last several months. We heard a fair amount of chatter about this at NHSDC. We've heard about it in other direct TA engagements that folks are doing and so we just wanted to talk a little bit.

MERADITH ALSPAUGH: This is going to be probably a little repetitive. It's just intended to be a high-level refresher. We may not be able to get into details of specific scenarios. I think we're gonna try and have some of our TA experts from Safe Housing Partnerships on the call next month that can go into a little more detail with folks. And in the coming slides I'll have some links too for you all to be able to access additional resources on these topics.

MERADITH ALSPAUGH: But sort of digging into this, just a couple points to remember. Like Fran was saying, we want to be sure we're grounding ourselves in survivor safety, privacy, security, and the confidentiality of their data. It is so critical.

MERADITH ALSPAUGH: Again, like she was saying, we know that people experiencing domestic violence, and whether that's sexual assault, whether that's trafficking, I'm using domestic violence sort of a catch all term here. We know that folks experiencing or healing from those experiences are accessing resources, they are accessing coordinated entry, whether that's through a victim service provider, whether that's through the mainstream or CoC, the coordinated entry access points. There are people that are having these experiences.

MERADITH ALSPAUGH: As such it's really critical that all coordinated entry staff are trained in these complex dynamics of domestic violence, privacy, confidentiality, safety planning. You know, these are really important considerations that should be taken with the victim service providers and the CoC, when designing and developing and implementing coordinated entry.

MERADITH ALSPAUGH: Also want to flag for folks again, it's probably repetitive but survivors are entitled to the full range of housing and service options available to them in their community. Sometimes there seems to be a perception that they go through the VSP coordinated entry system. They're only eligible for the VSP funded services or housing programs or whatnot. And we just want to remind folks that's not the case. They're eligible to, or entitled to access any of the services offered in the CoC.

MERADITH ALSPAUGH: So, let's talk a little bit about the design and coordinated entry and victim service providers. Again, sort of reacting to the feedback and questions we've had from and heard from folks. There's probably more than two ways, but for simplicity sake, we're going to talk about two ways to implement coordinated entry with victim service providers.

MERADITH ALSPAUGH: There can be a VSP who, in coordination with the CoC, develops and operates a separate coordinated entry system that functions entirely outside of the mainstream coordinated entry system, meaning the victim service provider is screening, assessing, prioritizing the survivor for housing resources. They're coordinating with the CoC to make sure that the survivor has access to this whole range of housing and services, but really all of the work, so to speak, is happening within the VSP organization and happening within the comparable database. So there is sort of one perspective on this.

MERADITH ALSPAUGH: We also want to be clear that victim service providers can refer a client to a coordinated entry system like the mainstream coordinated entry system for screening assessment and prioritization. There is nothing that requires a victim service provider to have a separate system, to have it completely operate independently of the CoC's coordinated entry system. It is very possible to make those referrals, the warm handoff, whatever that may look like in your community, to the mainstream CoC for the screening, assessment, and prioritization.

MERADITH ALSPAUGH: Now, it's going to be important again to remember victim service providers, prohibited from entering survivor data in HMIS, must only record the data in a comparable database. But again, if you're a victim service provider making a referral to a non-victim service provider agency that is operating coordinated entry, survivor's data can be recorded in HMIS by those non victim service providers.

MERADITH ALSPAUGH: Keeping in mind, of course, the survivors, like any other participants, have the right to have their data protected. HMIS should still remain meeting those high levels of privacy, security standards that your CoC has established. But there's nothing that's prohibiting that data from being collected in HMIS.

MERADITH ALSPAUGH: Furthermore, you know, again, a survivor, the same as anyone else, they have the right to refuse to disclose information that they may be unsafe to share. We get this question a lot. You know, within the HMIS data standards we do have fields in there that say 'client refused' or 'data not collected'. Whatever may be applicable to that particular client situation not survivor situation. That is within the power of the coordinated entry agency to make those decisions and collect that data in consultation with that survivor and what they believe is safe or unsafe to share.

MERADITH ALSPAUGH: Also wanted to flag as an important reminder that recipients of the CoC program DV bonus grants that are not victim service providers are not required to use the comparable database. We get this question a fair amount. Also, it's only the victim service providers who are prohibited from entering data into HMIS.

MERADITH ALSPAUGH: There are, like I said, there are a lot of folks still struggling with this. This can be complex. This can be challenging within the CoC, within that partnership with the victim service providers. But we want to make sure that you know there's help available.

MERADITH ALSPAUGH: There are a lot of resources available on the HUD exchange. There's a couple here listed: the 'Coordinated Entry Confidentiality Requirements in Practice', the 'Coordinated Entry and

Victim Service Providers FAQs'. I think Genelle is probably putting those in the chat for you. Those are very helpful pieces of guidance for designing and implementing coordinated entry with your victim service provider.

MERADITH ALSPAUGH: Also just wanted to flag because maybe some of you are new and haven't seen them or you've forgotten about them. There's the 'Coordinated Entry Core Elements Guide'. There's also the 'Coordinated Entry Management and Data Guide' that also speak to coordinated entry generally, but also specifically around victim service providers and people who have experienced domestic violence.

MERADITH ALSPAUGH: If after reviewing all those resources, having those conversations, having those, you know, coordination efforts in your CoC with your victim service providers you're still not quite able to make it there. You're still struggling with how your coordinated entry is set up with your victim service provider. There are technical assistance resources available.

MERADITH ALSPAUGH: So, the links on the screen, and I think probably in the chat, there is help available from HUD through the HUD exchange, requesting technical assistance. And then there's also help available through the Safe Housing Partnerships. So that's the domestic violence and housing technical assistance consortium. They are also a really incredible resource that you can reach out to for assistance. And like I mentioned I think we're going to try and get some folks from that team on the call next month to continue this conversation. But there's resources available.

MERADITH ALSPAUGH: We encourage you to submit an AAQ, I can't believe I didn't put the AAQ link on here. You're always able to submit an AAQ. But please reach out for assistance if this is something you're continuing to struggle with.

MERADITH ALSPAUGH: I think what that is back to Mary. Unless we need this pause for a second.

MARY SCHWARTZ: We can pause for a second, there's a few things to clear up. Genelle put the AAQ link in the chat.

MARY SCHWARTZ: So one question is, we have an agency who was awarded and had to, DV bonus for our RRH, we would treat this no differently than any other RRH program. Correct? That is correct unless the DV bonus is going to a VSP. So it's that same decision tree but it starts at the organization level. And if your DV bonus, there's no requirement for DV bonus to use a comparable database, the requirement is for VSP's comparable database. So if the DV bonus is going to a non-VSP, HMIS use is expected.

MARY SCHWARTZ: I don't know if Fran is paused, or if we lost her. I think there was one question about. Oh you're here okay.

MARY SCHWARTZ: There was a question about if VSP or, sorry, comparable database vendors should engage in these calls and yes, vendors are welcome to this call. Any vendor, HMIS or comp database vendor is welcome to this call. And there's also a link on the HUD exchange to sign up for the vendor specific call and VSP's should be on there as well.

MERADITH ALSPAUGH: And that link, full disclosure, sends me an email. So, if you all are working with that, you know, is working with a vendor, we're always trying to engage with the comparable database vendors more. So, if there are folks out there who are not connected to the resources absolutely, get them connected to this call, to us.

MERADITH ALSPAUGH: And working with Deb Fox and their crew of folks on getting on some of those calls, getting more engagement with those victim service providers, and their comparable database vendors.

MARY SCHWARTZ: Okay, and the last question that still isn't answered but we'll probably say please submit an AAQ. So it's a specific example of how your CoC does it and kind of wanting a thumbs up or thumbs down from HUD, that's a little more complicated. To get into the details and, you know, there's lots of factors that, and sometimes that HUD won't say thumbs up or thumbs down. It's just kind of how it, you want to roll it out and the CoC is in charge of a lot of these decisions and saying whether something is okay or not. But if you have any of that type of "Hey here's what we're doing, is this okay?" that's an AAQ to put in and we'll see what we can do to help. So I think now we're ready to move on.

MERADITH ALSPAUGH: And I think it's to you, right?

MARY SCHWARTZ: Yeah. Do I have controls? The power, the power in my hands right now.

MARY SCHWARTZ: So we are going to do HMIS data standards updates and just a reminder, we've talked about it on the call last couple of months, and we'll continue to talk about it.

MARY SCHWARTZ: Updates are made every other year for HMIS data standards and that gets confusing because they're implemented on October 1st of odd years, but they're actually called federal fiscal year, like the even number years, because the federal fiscal year is always named for the year it ends on not the year it starts on.

MARY SCHWARTZ: So, for example, Fiscal Year '22 data standards under which we are all currently operating, went live on October 1, '21. And it's pretty much on October 2, '21 we start thinking about that next 2 years. And how on October 1, '23 will be Fiscal Year '24 data standards. So that's the change process we're in right now.

MARY SCHWARTZ: We're very interested in your feedback and one thing you can think about doing is, just as you review materials like the data manual, the data standards manual, data standards dictionary, ask questions, suggest changes kind of pointing to specific things in there. Think about what the needs are for HMIS Leads on the ground, what would make things easier, et cetera.

MARY SCHWARTZ: The really big caveat, and we say this all the time, I think it's pretty straightforward, Just because it suggested does not mean it will be implemented. Changes are going to come from a bunch of different places, including this forum. So federal partners have a process that they're going through to think about their own federal partner elements. There are several stakeholder groups that are being convened, have been convened, were convened during the fiscal year 2022 change process and are continuing on to provide feedback in that way.

MARY SCHWARTZ: So lots of input can be gathered right now, but pretty much, and it sounds crazy, right? Cause it's, 2024 is so far away. But it's not, and the suggestion, kind of feedback process ends at the end of this calendar year. And at the next calendar, start of the next calendar year, when we're in 2023 and we know October 1, 2023 is when those data standards go live. That's when a lot of hard work happens.

MARY SCHWARTZ: HUD and federal partners make decisions on what is going to change what isn't going to change. Materials get drafted and we try and get materials out to the community stakeholders, you all, and vendors, and CoC's, and everybody gets stuff, hopefully 6 months before that go live date. So all of that to say, and I'll move to the next slide, that we are deep in it. We're like, in the change process right now and now's the time to think about what would make sense and get your suggestions aired through the HMIS AAQ.

MARY SCHWARTZ: Then once we have a kind of list of things that are suggested, just like we did for fiscal year 2022, we come back to this group and we talk through some changes that are suggested, we get feedback. If something needs a little bit more discussion and needs some input from the HMIS Lead perspective, this call would be the place that we do that.

MARY SCHWARTZ: It's not always going to happen. And again, it's not always gonna, every change isn't going to be accepted. There's gonna be plenty that we say "no, that's not reasonable, that change isn't going to be made". But now it's the time to get your voice heard. So we wanted to make sure that you are aware. That the next data standards change is on the horizon.

MARY SCHWARTZ: So, our goal is about a year from now, right? A year from this call, you'd see all that work kind of culminating in a final release of the HMIS data standards for fiscal year 2024. So, I'm excited. We're all excited. I hope you're excited too.

MARY SCHWARTZ: We are going to pass it over to Genelle. She's going to walk us through the 1st of two new resources that are out there for you to use. So, Genelle, take it away. I'll pass the ball to you while you get started.

GENELLE DENZIN: All right great, thanks, Mary.

GENELLE DENZIN: All right, so the resources that Mary was talking about, one of them is the HMIS Leads standards, which has come out and it is something I really recommend that people review and read. It is a document that that I feel has like, all, a huge gathering of all of the things that HMIS Leads deal with.

GENELLE DENZIN: I came to Abt from having been an HMIS Lead Data Analyst since like 2010, only in August of last year. So when I, first all this resource I felt like, you know, in its early stages I felt like it was already super helpful just because of how it, how many things are touched on inside of it.

GENELLE DENZIN: So these are just sort of quick baby, kind of, ever wondered how many full time system admins are recommended to run a well-functioning HMIS. So these kinds of things are some nuggets that are in this kind of document and I think it is something that people will be very interested to read.

GENELLE DENZIN: It talks about the kinds of governance documents you should have in place, the three main ones, being the HMIS Policies and Procedures, Data Quality plan, Security and Privacy plan. There is another document, it mentions the Data Analysis Policies and Procedures, which is sort of detailed. It's not like one of the main three that it talks about, but it's super interesting and we're going to talk about it in a couple of slides. So, those are the kinds of things that are there. Oh, yeah.

GENELLE DENZIN: Also how to sort of improve the accessibility of all your communications across your guidance documents, your email communications, webinars, data visualizations, all these have their

own considerations for aiming to put out good guidance that's accessible and where people will like, understand it. I was about to say next slide, but I can do it.

GENELLE DENZIN: So this is just a list of all the sort of headers in the document. If you just want to, like, take a second to look at all what's included. And what I was saying about how it's sort of just a large, a broad gathering of the kinds of things that HMIS Leads have to sort of be responsible about and know about in order to run a successful HMIS.

GENELLE DENZIN: So, I'm just going to leave it there just for a second.

GENELLE DENZIN: So, this slide we're just going to focus for a second on the reporting section of that document. You may see some concepts outlined in this section that are not really, they're not really new concepts, but they're more newly applied to our domain in homeless services, HMIS data analysis and such.

GENELLE DENZIN: If you are a data analyst, you may notice that this section addresses some points of tension in your work. So, I know in my experience, there were oftentimes that there were so many data requests that I just could not meet them all. Or I had to prioritize them and put them, like, sometimes say "I can get to that maybe next month".

GENELLE DENZIN: So having, like, a transparent process for responding to custom data requests is a really good way to get that in hand. So that you're not only constantly running and trying to get data out as quickly as possible without kind of, doing the vetting that you probably want to do to make sure that the data that you're putting out is like correct and done well, and in a reproducible way, which we'll, I'll get to in a second.

GENELLE DENZIN: But it also would give you in this, Data Analysis Policies and Procedures document that is sort of outlined in this guidance, it would also give others a sort of heads up, and they would know that there is a process to requesting data.

GENELLE DENZIN: So they will know, for instance, that if they have a monthly meeting, and at the end of that meeting, they need, they know they're going to need some data for the next meeting. They want to ask you right after that meeting and not right before the next one. So that you can spend the time to go through your process to get them the correct data that they need.

GENELLE DENZIN: Another thing that's discussed in this, like, what you would put in a Data Analysis Policies and Procedures Governance document, would be like a style guide, which would kind of get at, sort of prioritizing accessibility of all of your guidance, all of your communications including you're, if you have, like, logo, you know, colors that you have to use for your organization or whatever.

GENELLE DENZIN: Like all of that would be sorted out, including down to, like, the code that you write. So, if you're using coding of some sort, like, how often are you commenting? What kinds of conventions and naming conventions are you using? So that other people that come in after you, including future you, will know what they're looking at when they see your work.

GENELLE DENZIN: And then part of this, and this is part of the transparent process for responding to custom data requests, you would outline a development cycle for your work. So if you get a request for data analytics, a data analysis, I can't, I forget that word, right? You would have sort of a cycle in there,

right? Planning and design, the time for development, some time for testing and then probably development again, and then testing again, and then implementation, and then feedback and maintenance. And then again.

GENELLE DENZIN: So, you're always in some sort of cycle with these sort of data requests and the more you can stick to this kind of organized way and workflow, the more like trustworthy your data will be, the more like, reliable, your CoC will find that HMIS to be for decision making and ending homelessness.

GENELLE DENZIN: The other piece here, do I have time to go into reproducibility, Mary?

MARY SCHWARTZ: I think you do. You're good on time.

GENELLE DENZIN: I could talk for a long time about this.

GENELLE DENZIN: But anyway, so there's, some other concepts in there revolve around the idea of reproducibility. And your reporting and your work flow, and this is not only, I referred to, like, future you earlier. And it's basically like the reproducibility of your work helps you always know how you got from your data in HMIS to a given analysis.

GENELLE DENZIN: So, your goal, right, is to present consistent, credible and verifiably accurate data results. So when in your process here, you with your development cycle, you will have the planning and design portion. Right? So, in that step, you're going to be thinking about, like, how many potential points of failure exist between the data and the report.

GENELLE DENZIN: So, a potential point of failure might be like, directly in the data, for one. So like a misunderstanding maybe in the way your users are being trained and what you understand the data, like, how you understand the data is being collected. So those might need to be aligned.

GENELLE DENZIN: Another potential point of failure is in shaping the data to begin with. You can have a straight filter in your report. You can be incorrectly duplicating records or cutting too many out.

GENELLE DENZIN: And then if you have like, your data is staying within your system, that's one, sort of planning and design decision. If you're deciding to bring data out of HMIS and putting it into sort of this other visualization tool. There's processes in there, right? And you're adding in potential points of failure there.

GENELLE DENZIN: And the goal isn't to have 0 potential points of failure. The goal is to be sure that those points of failure or those potential points of failure are documented, and that people that are doing this process to get your data from HMIS to the analysis, is documented and can be followed and done again in the same exact way.

GENELLE DENZIN: And then, so that's what that's about, and then.

MARY SCHWARTZ: So, Genelle, can I ask, is this all, like, you're highlighting, like, one portion of the HMIS Leads Standards Document and one that, you know, of course, you're most excited about which I think it's funny that you can't say the word analysis or data analyst, that is your gig. But so this is like, I think kind of the first time, right?

MARY SCHWARTZ: This group of experienced people got together and kind of wrote down these various things that, like, you kind of know data analysis is in your wheelhouse a little bit, but it's like, this is part of the knowledge of how to use HMIS data on how to share it, share the analysis of HMIS widely, and I just want to make the point that when you're saying taking HMIS data and using it for analysis, or taking it out of HMIS, using those words "out of HMIS" that is not conflicting with what we talked about last month. Which is, don't take it out, right?

MARY SCHWARTZ: It seems like if you don't need to don't take it out, it's more about taking out the knowledge of the analysis and what it means for the community, and where it gets, like, you know, shared, not the data itself but the analysis shared with the community, just want to make sure people.

GENELLE DENZIN: Yeah, I mean that is partly what is meant, but also taking data out that doesn't, that's not, it doesn't have any personal identifying information and if you're putting it into some system, like Tableau or something, and you're pulling out data from HMIS and putting it into something public or in some kind of way like that, that is taking data out HMIS like, even if it's aggregated or whatever it is, so there can be potential points of failure in that process.

GENELLE DENZIN: And when you're planning how it is that you want to display your data, like, those things should be taken into account. And how are you going to you know, manage those potential points of failure to be sure that, like, when somebody wants that dashboard refreshed with new data next year you can do it. And it'll be correct, it will be the same analysis as well last time.

MARY SCHWARTZ: So, if this sounds exciting to you, like it does to Genelle and me. So, the HMIS Leads Standards Tool goes into, in more depth into these various topics and ways to implement because, I mean, who gets in future Mary's way more than anyone else. Past Mary, for sure. So, like, following some of these processes as you're putting data sets and analysis together is really it's a good process that is now outlined for us HMIS Leads. It's really specific to our, to our world, so thanks Genelle.

MARY SCHWARTZ: Anything else? I didn't see any questions come in on this. But again, this might, this particular part, or I think the HMIS Lead Document, Lead Standards is relevant to all of us. And there are parts of it that you're going to be drawn to. Right? Depending on what's in your wheelhouse in the community that you're in and what your role is in the HMIS world.

MARY SCHWARTZ: So thanks, Genelle.

GENELLE DENZIN: Thank you.

MARY SCHWARTZ: Okay. I believe I'm next to do the dual enrollment document. I'll get out of the questions section and just look at this for a second. I don't have, this is the only slide I put in here and the link is on the resource slide at the end. as well, I think.

MARY SCHWARTZ: Oh thanks, we've got a compliment. We got a compliment, the HMIS Leads Standards Tool. Awesome. So yay, that's a good segue over to

MARY SCHWARTZ: So dual enrollment document, if you go take a look at it, it establishes the hierarchy for the first time. on how to tackle dual enrollment. Specifically like, where you can easily eliminate them versus more, maybe, it might be a little bit more difficult, depending on the project type and how dual enrollment is thought of, depending on what level you're at.

MARY SCHWARTZ: So, kind of taking from, like, the easiest levels to tackle in terms of dual enrollment and duplicative inventory is the level 1, and kind of moves up to, it gets harder and harder as you go up. We all know this is a pretty dense topic, and there's lots of variables to whether dual enrollment is appropriate in that situation or not.

MARY SCHWARTZ: So, this, there is nothing that says you can't have one person enrolled in two, seemingly, beds, right, residences at a single night in HMIS. So it's not a rule, but it's a logical kind of place to be, if you're going to try and make sense of your inventory, your use of that inventory, utilization of that inventory in your community, and then to make systems change.

MARY SCHWARTZ: So any of the Stella P and Stella M stuff that's coming out from HUD that is giving communities, like really detailed access to data analysis about the performance of their projects and then Stella M, of course, is tweaking those inputs and trying to get at different outcomes for your particular community like, none of that makes sense if dual enrollments exist to a large degree.

MARY SCHWARTZ: If you can't rely on your HMIS dataset to tell you what interventions are being utilized by your population and what's working, what's not. So we are we are excited to put out there in a pretty methodical way, and kind of for the 1st time after a couple years of reporting errors, right? Errors and warnings and messages like, you know, this doesn't make logical sense. We're trying to map out with this Dual Enrollment and Duplicate Inventory resource what that logic really is project type by project type.

MARY SCHWARTZ: So, go check it out. It's really fun. It's really good. You'll love it too, I'm sure.

JESSE JORSTAD: Hey, Mary. There's a question in the chat I thought it might be best to talk to. Can you talk about why this document doesn't talk about homeless prevention, and what some of the considerations might be with that.

MARY SCHWARTZ: Great question. Great question. Homelessness prevention isn't typically thought of as a residential intervention in our homeless systems, because it's preventing somebody from needing housing assistance and when we think about using HMIS to figure out the interventions around our housing assistance.

MARY SCHWARTZ: Homeless prevention doesn't really fall into that category and really anyone else on the call, please jump in with a better explanation, but that's kind of how I think about it. So, what are the things in your system that provide housing assistance. They aren't homelessness prevention because that person is already housed.

MARY SCHWARTZ: It's not a part of the inventory of your housing assistance, your housing inventory counts, right? It's housing they already have and you're helping keep them in it, and it's very important in terms of interventions, but it doesn't help figure out the ins and outs of the bed interventions or unit interventions that move people experiencing homelessness off the streets and into a permanent place to be, like, moving people out of the definition of homelessness into places that they are no longer homeless is the housing assistance world.

MARY SCHWARTZ: It doesn't mean prevention isn't part of the system. It just means that it's not analyzed in the same way that a housing assistance resource is.

MARY SCHWARTZ: Does that help? I would also say coordinated entry, street outreach and services only are project types, and day shelter, project types that fit into that category as well where they're not housing, housing assistance interventions. They're like, housing resources, right? Helping people either stay housed or link up to a housing assistance resource but.

MARY SCHWARTZ: dual enrollment really only cause problems when it's about like a bed, a housing assistance resource that somebody is occupying like, on the same night. Two different resources that are meant for one person, one person's homelessness to end, I guess.

MERADITH ALSPAUGH: I think that's the main point, is inventory. In prevention there's not inventory. There's inventory for housing projects, shelter projects, residential projects. So we're less pressed about the dual enrollment in a services nonresidential project and a residential project, then we are residential to residential.

MARY SCHWARTZ: Yeah, the 1 to 4 levels represent, most difficult is level 4 and least difficult is level 1 in terms of conceptualizing a single person utilizing two housing assistance resources on a single night. That's basically the easiest way to think about it.

MARY SCHWARTZ: But it's a good what, 13, 14, I forget how many pages the dual enrollment document is and so it's worth a read all the way through. Certainly answer, or ask questions via the HMIS AAQ if any of it isn't resonating with you and do know that it's not encompassing all of the project types that we certainly think of as Continuum projects and helping to end homelessness in our communities. It's really focused on those project types that kind of cause issues if there are, there is a single person in both of them at the same time.

JESSE JORSTAD: I also wanted to mention that the document itself gets into a lot of specifics. For example, if you have an enrollment in rapid re-housing and PSH, it's understood that those do have times when they appropriately overlap, if you will. Right? So that's not unexpected or forbidden and that is addressed in the document if you go more in depth there.

MARY SCHWARTZ: Do I need to go more in depth on something? I was reading questions.

JESSE JORSTAD: I was just addressing a question verbally. Exactly right. It's not that like, all dual enrollments are prohibited right? Like this is just, like in an ideal world, you would have as few dual enrollments as possible, because it interferes with analysis and it impacts accurate reporting, right? But there are times when there's no other option, but to have a dual enrollment.

MARY SCHWARTZ: Yeah, this document has been in the making for a while, because we've got these logical kind of data analytics perspectives on the data. And then we've got like, on the ground reality, it's kind of balance against that. And so. There can't really be a hard and fast rule. Absolutely not allowed.

MARY SCHWARTZ: Because there are situations where it might actually make a lot of sense that somebody is in two, seemingly, housing assistance projects at the same time.

MARY SCHWARTZ: But it's for you all to kind of, this hierarchy and this document is kind of structured to have you start thinking critically about when that's absolutely a mistake versus something that needs to be allowed for whatever reason.

MARY SCHWARTZ: Okay. Same with Genelle with the HMIS Lead standards, the document that Genelle presented on, you know we put, we are just kind of brushing on the high points here at the system admin call and will let you go and look through that resource and then I like something to argue with as much as the next person, so go ahead and put in an AAQ, if anything isn't sitting with you, or it doesn't actually answer the question you have. We'd like to engage in the AAQ for that as well.

MARY SCHWARTZ: And just to say too, that the struggle with dual enrollments might spark some great ideas and solutions you might have for data standard changes too, right? Like you guys are the experts on the ground struggling with these things that we all want to make sense of so what could possibly a data standard change be that would help make more sense of it.

MARY SCHWARTZ: Okay, I am going to move this along to wrapping up the slides unless there's any other questions or anything we should talk about some more for everyone. Looking at my panelists.

MARY SCHWARTZ: Okay, so we always end with, about this, the resource links slide that lists all of the, mostly the stuff that we've talked about throughout the call today. Some older stuff up top, those are the things we tend to reference almost every call and the newest resources we just talked about, the dual enrollments, and the HMIS Lead standards.

MARY SCHWARTZ: I added the CSV data quality tool link to the list this time around. So, if you haven't gone and look at the CSV data quality tool lately you should. That's a great one too.

MARY SCHWARTZ: We do know that our next call is going to be on May, what, 18th. Cool. So May 18th we get back together. This happens all the time, every month, third Wednesday of the month, 1 to 2:30 PM eastern time. And if we end early, we end early all the better, right? For you to get more work done in your day,

MARY SCHWARTZ: But make sure that you are communicating about this call to your CoCs like Fran mentioned earlier in the presentation today, and that you're inviting anyone who you think you should listen to these conversations as well from your community. We trust you guys to get the information out there that this meeting is available and happens, I mean, it's a regularly occurring, kind of chance to interact with HUD. about HMIS stuff, so all good things.

MARY SCHWARTZ: We know that next month we will have a feedback session. That means we will summarize for you in a feedback-y kind of way the feedback that you gave us in February on LSA. Was it February or March? Jeez, who knows, right? I think it was March, actually, on the March call. We got some feedback from you. It was a very exciting time for all of us and we will provide some feedback on that feedback to you next month as well as any other topics you suggest.

MARY SCHWARTZ: Now's the time to type in a question and just say I think we should talk about blank next month, and we will take that under advisement as well. So please, or if you have an idea after we hang up here you can submit an AAQ, and we take meeting topic suggestions at any time.

MARY SCHWARTZ: I am looking at any of these outstanding questions to see if there's anything. Are there any outstanding questions that we need to address before we hang up?

MARY SCHWARTZ: Looks like some good suggestions. Yeah. Okay.

MARY SCHWARTZ: So, again, thanks for coming today you guys we really appreciate it. Have a great rest of your day. And we look forward to talking you talking to you next month. Thank you. Thanks, Genelle. Thanks, Fran. Thanks, Meredith. Thanks, Jeanne. Thanks, Jesse.

MERADITH ALSPAUGH: Mary, did you forget?

MARY SCHWARTZ: Oh no, I did! I totally forgot but I have it right here. Okay. That's why everyone's been so quiet. Oh, my goodness.

MARY SCHWARTZ: Okay. What do you call a firefighter who is also an influencer, Meradith. Firefighter who is also an influencer. What do you call them?

MERADITH ALSPAUGH: A hot toddy? No, sorry.

MARY SCHWARTZ: A stop, drop, and role model.

MARY SCHWARTZ: Yeah, well now all right sorry for forgetting that. And I will talk to you all soon.

MERADITH ALSPAUGH: That's awesome.