

February2020-HMIS-Webinar-HS17-005



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0:00:04 Melissa Witham: Hello and welcome to the HMIS System Administrator Webinar. My name is Melissa Witham and I'm a TA provider with C4 Innovations. I'll be introducing today's webinar. During this webinar all participants are in listen-only mode. You will be able to hear today's presentation through your computer speakers. If you're having any trouble with your audio, please request assistance through the Q&A pod on the right-hand side of your screen. This session is being recorded and will last 90 minutes, including time to answer questions from the Q&A pod. Presentation slides and the recording will be available on Sakai in the coming weeks. Up above, in the top right you'll see an audio support pod that explains to you how you can check your audio.

0:00:52 MW: I'm joined today with Meradith Alspaugh of Partnership Center who will be leading the call. There are also various HUD staff and TA providers behind the scenes who will be answering your questions in the Q&A pod. I will now turn over the presentation to Meredith.

[pause]

0:01:13 MW: Meredith, you're muted.

0:01:17 Meredith Alspaugh: There we go. Hi everyone, this is Meradith Alspaugh from the Partnership Center. This isn't my first time doing this, believe it or not. But I am here covering for Mary Schwartz today. She's unable to join us so I will be trying to fill her shoes with the facilitation role today. Thank you all so much for joining us. Just a couple housekeeping slides like we always do. As Melissa mentioned, everyone is muted, slides and recording will be posted to the sys admin hub after the call, please use the Q&A pod. Also, as a reminder, it's really helpful for us when we're answering questions if you could give us a little more context when you ask a question, for instance, the slide number or the topic. If you could just be as specific as possible that's super helpful to us when we're answering questions.

0:02:09 MA: We will do our best to answer all the questions. Like I mentioned, we're a person short today so we might not get to every question, or there may be some questions that are more community-specific and really better addressed through the AAQ portal on the HUD Exchange. So please make sure if you have questions that weren't answered, or something specific to your community, submit a question on the AAQ, select HMIS in step two, and let us know that your question is related to something that you heard on the HMIS lead sys admin webinar. It's very helpful.

0:02:44 MA: I want to thank the staff on this call with me today. We have Fran Ledger from the SNAPS office, she'll be doing some updates here momentarily. We've also got Brian Roccapriore from Cloudburst behind the scenes answering questions. And then Jules Brown will also be joining us to do a little presentation and answer some questions on the back end too. So, our agenda for today's call, going through... Like I said, Fran's going to do HUD updates, Jules and I will do technical updates. And then today we actually have two special guests from two different communities who are going to be presenting some information about their coordinated entry systems that they've implemented in their CoCs. So, we're really looking forward to them having this opportunity to share some information and take some questions if there are any from you all. So, let's go ahead, I'll turn this over to Fran to do HUD updates.

0:03:48 Fran Ledger: Hello everyone. Thank you for joining us today. I have quite a few things, so

I'm going to go through them hopefully pretty quickly, but you'll have access to the slides so you can read this stuff in more detail. I want to start off with just some important updates as far as deadlines go. You all know that the system performance measure deadline is quickly coming, and Jules will talk more about that in just a bit. HDX is opening for HIC PIT, that's coming up. And April is a very busy month, we have a lot of stuff going on. The coordinated elements, the coordinated entry data elements going to go live. Hopefully, you'll be joining us at NHSDC. We are co-sponsoring that event with NHSDC, so there will be a slew of HUD content there this time. It will be like the last spring conference.

0:04:45 FL: And then we also have HIC PIT due in April, at the end of April. And then there are some LSA updates, they're going to come up later in the call, and we will talk to you more about that. We also... I wanted to let everyone know we're really trying, our goal this time is not to have any changes in 2021. That includes the data standards, LSA, and we're trying for SPM. There might be a little bit, but we're trying not to have any changes. We also want to let folks know that the data standards... So just a reminder, it is a cycle. And so, the next change will come in fiscal year 2022. And because it's a process, we're starting to kick off in April our federal partner subject matter expert work, so we'll be reaching out to several partners to start engaging them and trying to figure out what are the next things coming up that we need to start focusing on with data standard changes.

0:05:47 FL: I want to talk a little bit about data integration, and I talked about this with the vendors on calls, just I guess it was our last two calls, I talked with them about it. With data integration HUD is really taking a focus on this, and we are looking at packaging a lot of different technical assistance products that have been developed over time, and also partnering with other folks that have developed things around data integration and sharing that can be helpful for communities. We are really seeing that there's a push for improving import-export functionality, and there's a lot of demand. We know to make this work, that the HMISs need to be able to do this more efficiently and effectively, and we also need better data quality, right? We need to be improving that because it's hard to do data integration projects, really invest in those, if there's not good strong data quality. So, HUD is really doing what it can to support those causes.

0:06:51 FL: And you can see some of this work happening in with HOME's HMIS initiative, there's been conversations about that. Of course, coordination with mainstream resources that we've been pushing for quite a while. There's been a big push around coordination with health systems recently, that's really expanding. And then we're really trying to figure out better how to increase shelter coverage, because as you know if you've been in this for a really long time, there's always that challenge with increasing shelter coverage when you're working with shelters that are not using HMIS. So how do we work with those shelters that may be using different systems? Spring conference is coming up. Like I mentioned, it's a HUD-approved activity. So, registration is open. I know... And it is really filling up quickly, so if you plan to register, you should do so soon.

0:07:50 FL: I want to talk about something that we haven't really talked about in a way that's been I think this concise and hopefully this clear. I want to talk about HMIS lead changes and HMIS transfers. And this is a little bit different than maybe what you're used to. So, in this regard for the HMIS lead change, I specifically want to talk about what happens when an HMIS lead changes and what happens to the grant. So, there's a lot of confusion around this. We know CoC... The CoC has authority per the CoC interim rule to designate the HMIS lead. So, everybody is very familiar with that piece. And with that authority, they can make the decision to change the HMIS lead. And when they do that, what happens is the HMIS grant, the funding in that grant, it's really broken down into

a set of activities, and part of those activities can only be used by whoever has the designation of an HMIS lead. So, if you are an HMIS lead and you're an HMIS grant recipient and you lose that HMIS lead status because the CoC designates a new HMIS lead, you can no longer spend a portion of that HMIS grant on those activities.

0:09:29 FL: So, by the HMIS lead designation changing, the HMIS grant must also change. And so that goes through a normal grant amendment process. So, what you're seeing in this paragraph is, really, we work to try to make this as clear and concise that if the CoC designates a new HMIS lead, the grant follows, and it follows through this normal grant amendment process. And it has to, because you cannot spend the funding in that grant any longer if you're no longer the HMIS lead. And then the other piece of this, so on the other side of it, is that HUD still has a very clear expectation for the CoCs that when that designation is made, when they're going through that process of changing that HMIS lead, we continue to push that that process be clear and transparent, and it be a documented decision-making process. So, we continue to educate on that and to produce materials that support that process.

0:10:41 FL: We've had a lot of questions come up about this, we've been working with a lot of field offices and a lot of communities that have gone through HMIS lead changes. We felt that that would be helpful to talk about on this call. The second piece to this is when an HMIS lead changes, the HMIS has to change, right? Who controls the HMIS has to move over to that other HMIS lead, Sometimes that can be difficult because sometimes the HMIS vendor then has to enter into a new contract with an HMIS lead, and there's some hesitation there. But from the 2004 HUD Data and Technical Standards, there's a piece in there that gives the CHO... There's, administration functions that are allowed in there. There's oversight and management functions. And that is allowed for an HMIS lead, and it is not considered to be specific to an agency, but it is designated for that role.

0:11:47 FL: So, if the lead changes, then that software can change to that new HMIS lead. There are... Communities sometimes have privacy notices that can be very narrow in focus, and can have really restrictive protocols on it, and there may be some agreements that are really restrictive, this does not supersede that. But know that your 2004 HUD Data and Technical Standards have in it provisions that would allow for that change to happen. Comparable databases, just to be really clear that on the comparable databases there is a specific description out there for what is classified as a comparable database. It is listed here. Note that it must have the most recent reporting standards in it, and it must have the CSV format specification. A lot of our comparable databases out there don't necessarily meet that. So, if you're having comparable databases in your community, that's what our expectation is. If you have questions about VAWA there are links there, to get more information about VAWA. I really recommend the document in there that's the further VAWA guidance, it has a lot of good information in it. And I will turn it back over to Meredith.

0:13:11 MA: Okay, thanks so much, Fran. So, we are going to move into our technical updates, and we're going to start off with Jules giving us some updates here.

0:13:23 Jules Brown: Thanks, Meredith. I wanted to update folks on the status of the LSA. Obviously, we're shifted a little bit in terms of the timeline that HUD put out back in October, maybe. October/November. We've completed the updates to the specifications in the data dictionary, which will need to go to the vendors, as well as the code. And those are all in review with a team of technical programmer folks, and then those will move into review by the vendors over the next several months. They'll also be receiving as part of their package, a set of test scripts for all of the

upload errors that the HDX will have integrated this year. So that'll look really different than it did last year, where the fatal errors or warnings were all received by you guys after submission in an Excel spreadsheet. This year those will be baked into the HDX and the vendors will all have scripts so that they can run those scripts on their code before even putting the report out to the CoC. So, the vast majority of the flags that were in those spreadsheets that you received were really the kind of fatal errors that implied a programming problem, so hopefully by getting those things to the vendors upfront, heading those off at the pass, you're going to see way fewer warnings in the actual interface there than you did last year.

0:15:18 JB: So, all that work with the vendors will go on for the next several months, and then the HDX 2.0 will open for submission over the summer, and there will be data cleaning and confirmation following that. Do I control the slides? Sorry, yes, I do. Oh, look at me. Okay, sorry about that. I did want to take this opportunity to do a few helpful tips of what it is that you guys could be doing right now while the vendors are doing programming. I talked about this stuff. I did the same little spiel in the PIT HIC office hours that were last month, but I'm just going to run through these data points again in case any of you were not available for that call. These are things that you can be doing regardless of running the LSA. These are all... The LSA is entirely driven by the universal data elements and the project descriptor data elements, and the vast majority of you guys have data quality reports built into your system that look at those data points. And really, the only thing that LSA is asking is, "Are these data points complete? Do they make sense?"

0:16:42 JB: So, if you can do that now, up front, you're going to really wipe out a whole ton of the errors that you might be facing, errors and warnings that you guys might be facing. So, cleaning up those data now, and of course on an ongoing basis as a regular part of your data quality plan, super important. I know you guys are all doing that every month, but just in case you aren't, here's a couple of tips that you really want to focus on. First of all, identifying and merging duplicate records. That's something that your application should have functionality to facilitate, do that. Note that only data associated with valid enrollments get included in the LSA. So, what is a valid enrollment? A valid enrolment has an entry date, has a personal ID for the client, has a project ID that they're associated with, a household ID for everyone in the household, it has a valid response to relationship to head-of-household. Valid response meaning that there's one person in the household who's identified as self, and they're not more than one person identified as self, and there are not zero people identified as self.

0:17:57 JB: And that there's an enrollment CoC associated with that enrollment. So, if you operate in multiple COCs you need to make sure that there's a CoC associated with the enrollment. If that project only operates in one CoC, the system still needs that assignment, it should be defaulted in your system to the CoC that it operates in. If there's data that's not associated with a valid enrollment, like a bed night, that's just floating in your system, it's never going to get picked up anywhere. You need to make sure that everything about an enrollment is populated in order for it to get pulled into an LSA report. Just a reminder that there can only be one... Just another emphasis on that one and only one-self, head-of-household. And again, those would be excluded if there are more than one head-of-household or zero heads-of-household.

0:19:04 JB: For emergency shelter, safe haven, transitional housing, the exit date must be at least one day later than the entry date, otherwise it will be excluded. If the person didn't actually spend the night they will not be counted as someone who spent the night in such a project. This is not the case in rapid re-housing where sometimes you get one-time assistance and then you are exited from

the project. So as long as the move-in date is equal... If the move-in date is equal to the exit date, that person would be counted as housed for purposes of the LSA. However, PSH, which is different from RRH, is different. If a move-in date is equal to the exit date, they will not be counted as housed via PSH during the report period. And that's because the project model for PSH, the point of that project is obviously to house people, so if they exited on the day that they moved in, then they're no longer being served by that particular project.

0:20:13 JB: And in particular, for night by night emergency shelter, the exit date must be one day after the last recorded bed night. So, if you have a recorded bed night in September and then the client exits in December, for example, but there's no bed night between October and December, that time is lost. And so, the report will default back to an effective exit date of that last bed night from October and add a day. But then you lose anything that you might have recorded in that destination field because it sets your exit information back to that date in October. So you want to make sure that you're really looking at when people haven't been served in night by night shelters for a certain period of time, that you're actively going back and closing out those records as of the next day, not the day that you discovered they stopped going to the project.

0:21:25 JB: We also do something similar if... You don't have to choose 90 days, but you do need to be setting a regular amount of time for which you take that look at night by night shelter clients. So, you might do 30 days, if they haven't been in for 30 days, you might take a close look at that. Maybe your system just functions a little differently and you want to set it to 120 days and take a look at that, that's fine, whatever you want to do. But if you're not proactively doing that, and we're seeing lots and lots of clients where there's no record of an exit and the client hasn't been served in a project for more than 90 days, we're going to, again, set that effective exit date back to the day after the last bed night.

0:22:11 JB: Often when projects cease operation, we get a lot of questions about that on the AAQ. Clients should, in general, be closed, and then if a project actually ceases to operate and closes, clients need to be exited from that project presumably because that is the true case of what happens. Sometimes that doesn't happen for administrative reasons, so if there are enrollments that remain open after a project's operating end date, you want to take a look at that and close those out. Otherwise, we will just default to the operating end date and we will again have that unknown destination information. We lose any destination information that you might have recorded after the fact. So if you do go back and clean up those data, and you close the record for today's date, even if the project closed two months ago, and you record a destination because you happen to know it, we would lose that data because we're setting that exit date back to the day the project closed.

0:23:21 JB: The LSA also relies on project descriptor data elements quite heavily. One of the questions we got a lot last year is why we continue to compare the LSA data with the HIC because they're two different time periods, or any number of questions that come up around it. We will continue to do that. With the data that you upload in the LSA, we have, in those records, if you are recording them accurately in HMIS, project start and end dates, inventory start and end dates, and whether or not they're participating in HMIS. So, in theory, with those data points we should be able to calculate the inventory on any given date that falls in the reporting period, including the date that you, your particular CoC, did their HIC.

0:24:19 JB: So, what we do is we actually look at those data on that day that you had your HIC and compare it to what you report in the HIC. So those should be consistent, there's really not a reason

for them, mathematically, not to be consistent. So please make sure when you're filling out your HIC this year that you're remembering to check that against what's in your HMIS records and bring your HMIS records up to date if they need to be brought up to date. A couple of tips on bed and unit inventory in general, just remember that dedicated beds refer to the beds that are dedicated for the population group specifically, and their household members. If it's not a single unit, a single bed, and it's designed to serve a family, then make sure that you're also including those beds for the household members.

0:25:01 JB: Seasonal beds. If you have seasonal beds you have to have an end date for seasonal beds. It cannot go on forever. Your units cannot be greater than the number of beds that you have in every individual inventory record. So, check that. Every single emergency shelter project has to have a bed type. If it doesn't, it will trigger a flag. You have to have start dates for both projects and inventory records. If they have ended, you have to have an end date for each of those. If there are active projects that have no active inventory, we're going to be confused. If there's active inventory with no active project, we're going to be confused. When we're confused, we ask you questions. So, if you don't want us to come back and ask you questions, check that stuff out. All of these are things also that will confuse us and make you come back to ask you questions. If you're missing geo-codes, if you're missing zip codes, if your geo-codes don't match the geo-codes that're assigned to your CoC, if your geo-codes or zip codes are the wrong number, the wrong format, or you're operating in zip codes that are outside of your state or outside of your jurisdiction, we're going to come back and ask you questions.

0:26:43 JB: And also, if you have multiple... You can have many CoC codes in a single project if a project legitimately does serve multiple CoCs. But if you have two of the same CoC codes, we've seen that sometimes, we're going to come back and ask questions about that. So, make sure you tidy that up in advance. Also, consistency around HMIS project participation. If you say that a project is not an HMIS participating project, but then you report clients in the LSA that were served in that project, we're going to ask questions and vice versa. If you say a project is participating in HMIS, but no clients were served in that project, depending on the project type, we're definitely going to ask you some questions. If it's, for example, rapid re-housing, we might just ask you to confirm that no one was being served at that time. There are situations where that can be true, but we'll probably ask follow-up questions. So just make sure that those are consistent, and if there's an apparent discrepancy between them that it is in fact true. And then you can always just answer the questions with, "That is true", and that's usually satisfactory for us.

0:28:08 JB: And then make sure that all PDDEs or the project descriptor data elements are complete for all your projects that are in your HIC regardless of whether or not they participate in HMIS. Any projects that are missing PDDEs are going to cause us to ask you questions. And if that project does participate in HMIS, it causes a ripple effect because a lot of those project characteristics get assigned out then to the clients that are in those projects. And so, it just kind of multiplies the problem. So do make sure that all those PDDEs are complete. Also take a look at your funding sources. So, if you say that you're getting funding from a source that has a dedicated population associated with it, like the VA or RYE or... Well, those two are pretty much, I guess, it. I don't know if that's an example. Those are the... That's the list. But then you say that you have zero beds dedicated to veterans or zero beds dedicated to youth, we're going to ask some follow-up questions because that's just not logically consistent.

0:29:19 JB: And similarly, if you have incompatible funding sources. So if you say that you have

two funding sources, and one of them is, for example, CoC program rapid re-housing, and the other is ESG program emergency shelter funding, we're going to ask questions about that because you can't have those two separate funding types in the same project. Those are all my hot tips about cleaning up your data in anticipation of the LSA. Another reminder of a report that's coming up, is the system performance measures. Those are due on the 28th, and less than half of you guys have started. So, make sure that you do get the ball rolling on that, and make sure you can access your account in HDX 1.0. We certainly don't want you to be waiting for the last minute to find out that your account's locked or some other issue you might be facing. Meredith is going to talk a little bit about some of the vendor concerns that have come up around the SPMs, and I'll turn it back over to her. Thanks.

0:30:38 MA: Thanks, Jules. Yeah, so like Jules was saying, we know that we've received some questions from vendors. You all have asked some really good questions of your vendors about how different things are programming as they relate to the SPMs. We know that there are some vendors doing some updates in their reports, and we know that may be causing some concern from you all. But we just wanted to reiterate, like Jules said, it's really important to get started on the parts of the SPMs that you can get started on. It's really important to make sure that you can even get logged into HDX 1.0 at this point. So, taking those first steps and making sure that you go log in, start the processes that you can, or the pieces of the report that you can, that would be great to go ahead and do that. If you have specific questions, as always, you can submit an AAQ. But we have been working with vendors and they are well aware of the timelines and will be making any final updates imminently.

0:31:47 MA: Okay. So, let's do a couple of questions we have, or comments we have received about the APR. We get a lot of questions in the AAQ about Question 22e on the APR. And this is the question about "length of time homeless before moving into housing". We know that this has caused some confusion, so we thought we'd just try to cover all those 300 of you at once here and answer those questions. So yes, Q22e should be reporting on all people. If your system is set up to collect 3.917 data on household members, including children, this question should use that data. So, as a reminder, this is looking at length of time homeless prior to project start. If you have that data on children, use that data. If you don't have that data, which it's not a requirement that your HMIS is set up to collect that information on the children, the head of household's response should be propagated to the children.

0:32:56 MA: This applies to any household member who is 17 or under as calculated by the glossary regardless of their relationship to the head of household, but not clients of unknown age. And the vendors have been provided this information, and they've also been told, "Only propagate the head of household's data." The children with the same start date as the head of household, if they enter after the head of household, they are counted in the data not collected question. So hopefully, this will help any of you that are still struggling with this question. Again, all of the vendors have received this information multiple times, so that question should be calculating the information in this way. There was also another issue identified with question Q23c in the APR and the CAPER. And this is the question about the length of participation in the project, I believe. This is a question that in last year's version of the CAPER and the APR, we had 23A, 23B, 23C, some were applicable to some project types and not to the other.

0:34:09 MA: And so, in this year's... Excuse me. In this year's version of the programming specifications, we simplified it to just have Q23c, but we realized that there was an error in the way

that the Sage validator was analyzing the data in Q23. So, there were some APRs and CAPERs that were submitted that had errors in Q23c. We have informed all of the vendors that this was an issue, we have corrected or turned on the validator in Sage so that if there are any reports that are being uploaded with bad Q23c's, they will be caught now. But we just wanted to bring this to your attention. If you have an RRH project in particular, if you could test it before you go to finalize and submit your CAPER or APR, that would be great so that if there's any issues, they can be resolved.

0:35:09 MA: Okay. So then let's move into the coordinated entry APR. Hopefully you all saw that the programming specifications were posted to the sys admin hub today. I know there was some confusion about where they were actually located. If you log into the sys admin hub there's a folder called Coordinated Entry, and I believe they are in that coordinated entry folder. So, you can pull those out and take a look at them also if you would like. We provided these programming specifications to the vendors on their call at the beginning of this month. So, they have had a chance to take a look at them. We haven't gotten too many questions back on them yet, but they all have them. So just wanted to start with a little bit of a big-picture concept here with the coordinated entry APR. This APR is due to be effective on October 1st, 2020. Until then, continue submitting the coordinated entry APR that you have been submitting in Sage. There is no change to what's due in Sage until after October 1, 2020.

0:36:23 MA: This report is a little bit different than a typical project level APR because this is going to be a system-wide report. And, this is going to be a report that is required for any system that receives a HUD-funded, FSO coordinated, entry grant. And the data that is going to be generated here is going to be coming from all of the projects in the CoC regardless of their funding source. The projects that are collecting coordinated entry aren't necessarily Type-14 in the HMIS. It could be emergency shelters, it could be housing projects, street outreach projects. There is a... Every type of project is up for scanning when this APR is being generated. The HMIS is going to be required to generate a single CE APR CSV based on these programming specifications. And again, we've told this to the vendors also, the expectation from HUD is that, like a regular APR, the recipients themselves should be able to generate the CSV without vendor intervention. If the recipient themselves can't do it because of the way that data sharing works within a particular community or whatever, then the system administrator would need to be able to generate this report.

0:37:46 MA: Again, the intention is not to make it where communities are reliant upon the vendor to generate this report. For comparable database reports, the system, air quotes here, is limited to all projects operated by the CoC grant recipient organization whose data is captured in the comparable database system. We're going to walk through the tables, and some of you may have already seen this if you've looked at the specs. But the APR consists of 10 separate tables, for a total of 10 CSV output files. The structure of each file has to match the layout in the programming specifications exactly as far as the quantity and sequence of lettered columns and numbered rows. We tried, to the extent possible, to re-use existing table structures to make it easier for vendors to reuse their programming, to the extent possible. But we recognize there's going to be some cells within these tables that aren't applicable, and you'll see those as we dig into it a little bit more. The client universe that is being used for this report, like I said, is at the system level, and HUD understands that, based on the different HMIS implementations, coordinated entry data could be scattered across the system in multiple project types.

0:39:11 MA: But in general, the universe for this report is going to require the system to scan all of the projects for the following clients and enrolments that are included in this report. So questions

four through nine, we're going to be looking at clients in any HMIS project using method two, active clients by date of service, as defined in the glossary, where the enrollment has data element 4.19, which is the assessment, with the date of assessment in the date range. So generally speaking, the client had an assessment during the reporting date range. When including coordinated entry events for these clients, the system is also going to include data up to 90 days past the report's end date. So, we'll dig into that a little bit more. But the intention here from HUD is that they recognize that there may be an assessment, and then a long period of time may lapse before an event occurs related to that assessment. Particularly maybe if it happens at the end of your reporting period, the assessment occurs but then even a month later they may have their event that happens that coincides with it, HUD wants to pick those events up into this reporting period, so we've expanded that window by 90 days.

0:40:33 MA: Unless otherwise instructed within the document, your vendors using the data from the enrollment with the latest assessment, and household members attached to the head of households enrollments who were active at the time of the last assessment are also included. So that's questions four through nine, people who had an assessment in the date range. And then question 10, again, because everyone recognizes, HUD recognizes, there may be times where an event occurs without an assessment, or an assessment occurred in the prior reporting period, but they wanted to have a comprehensive look at all of the activity that happened in coordinated entry. So, question 10 is picking up everyone who had any coordinated entry activity. So that means they had an assessment or an event during that date range regardless of when the assessment occurred. Brian, I am not watching the questions, but is there something about anything we need to stop and look at?

0:41:40 Brian Roccapriore: There's a couple of things coming in, as you might imagine. A lot of questions about if we're entering coordinated entry information into a comparable database from a DV provider, how is that recorded?

0:42:00 MA: So, if it is a grant that a DV provider has, then they're reporting just on their system when they're uploading into and submitting their APR into Sage. So, it would just be on the comparable database system.

0:42:17 BR: Okay. And if a community is not receiving HUD CoC coordinated entry dollars, the expectation that they're going to submit a coordinated entry APR is not there, correct?

0:42:28 MA: Correct. Only those recipients of an SSO CE grant.

0:42:33 BR: Okay.

0:42:36 MA: Okay. Well, I'll take a look at the questions, too. We can keep moving on through here, and then we'll answer questions. So, digging into the tables themselves, Q4a should look familiar to all of you. It is the same Q4a that is in the current CoC APR and ESG CAPER. It's going to be important here to make sure that all projects that are scanned for this report are included here. So, as a reminder, you can have as many rows as you need in this report. So, if there's 50 projects that were scanned, all 50 of those projects would be named here. The report validation table is also the same, but you can see here that there's going to be some data that's not applicable for this report, and those cells are grayed out in this table.

0:43:25 MA: So, there's not a validations table for... Or cell, for levers, for instance, because we're

not reporting on those levers in this report. We've also kept only one of the data quality tables from the CoC APR, which is the data about PII. Given the significant variance across communities on how different data is collected, it was challenging to find a way to look at data quality in that way. But this is the data quality that will be evaluated for this particular report. Also looking at number of persons served. Again, as a reminder, these questions were only looking at data on clients who had an assessment in the reporting period. So, Q7a is going to be the number of people with an assessment during the period. I'm not sure who's typing, but would someone mind going on mute if they're typing? Thank you.

0:44:26 BR: That was me, sorry.

[chuckle]

0:44:28 MA: That's okay. I knew it wasn't Jules. The Q8a is going to then be the number of households served, again, for those folks who had an assessment in the date range. Q9a starts getting into the actual coordinated entry data elements. So Q9a-9d, we're counting only households here, and we're using the latest coordinated entry assessment in the report date range. So again, then this is going to be reporting out on the location of those assessments, and the total number of people assessed. And then looking at prioritization status for those that had an assessment completed, what was their prioritization status, and then the percent of those who were prioritized of all that were assessed? 9c then is going to be comparing those households with an access event in the date range. So, looking at those who were referred to prevention assistants, or referred to a coordinated entry assessment, those types of things.

0:45:47 MA: The data selection is going to be a little tricky here. The universe gets a little bit tricky for 9c and 9d, because HUD, we all recognize that there are probably lots of events that occur with an associated assessment. And so, trying to identify the most appropriate event is challenging. But what we're looking at... And I know it might be hard to see on the screen here, but this is also available to you in those specs. We're trying to find the most, hopefully, most relevant event that would correspond to the assessment that occurred in the date range. So, in this example here, you can see that a client had an assessment. That's what the A is here. And I realize you can't see my mouse as I'm drawing these things, but there's an A here. This was when the assessment occurred. Here's an event down here at B, here's an assessment. Here's another event down here at D. And so in its most broad strokes, if we're looking for the last event that happened within 90 days after the end of the reporting period, it looks like D here would be the most recent event.

0:47:09 MA: However, we know that there was also an assessment that happened here at C, and it's highly likely that this event actually goes with that assessment. So, we've written the programming specs to exclude any events that may happen after another assessment occurs. So, in this example here, when you're reporting on the event for this particular client who had the assessment during the date range, we're actually going to be reporting on B here, and reporting that referral to rapid re-housing. We're going to ignore this last event because of this other assessment that occurred. And I know that might be a lot to digest, but I just wanted to give you that little bit of context because I think that's something that we all spent a lot of time trying to... HUD tried to understand and tried to work out which events we should be recording, because we know that we're trying to get the best information out of this report that we can. So, for 9c, that's the logic, as well as for 9d, because here we're going to be looking at all of the events that were the referral events.

0:48:19 MA: So, referral to housing or residential projects, looking at the rate of success for those different referrals, looking at aftercare, and the rate of success. And again, this is all looking at people who had assessments during the date range. And then Q10 here is going to be that different universe where this is going to be the reporting on all activity that happened during the operating year. So even if their events... I'm sorry, if their assessment occurred outside of the date range, those events are all going to be reported here so that there's one report of generally all efforts put forth by the coordinated entry project, so everything that occurred during the reporting period. And so those are the 10 CSV tables. There will be a couple of other narrative-based questions that recipients will be responsible for answering. But this is specific to just the HMIS report. So, I'm going to stop there before we turn it over to our community partners and see if there's anything we need to talk more about now, or if I should just look at the questions.

0:49:40 BR: Apologies about all the typing noise earlier.

0:49:43 MA: It's okay.

0:49:45 BR: So, if a community has a regular coordinated entry, non-DV, can they ignore the DV coordinated entry referrals that are operating outside of HMIS?

0:49:57 MA: That's a good question.

0:49:58 BR: Can we submit the APR from HMIS data through some DV, although some DV kinds will be excluded?

0:50:06 MA: Will you submit that one to the AAQ? Unless, Fran, you know that answer off the top of your head?

0:50:13 MW: Submit that one to the AAQ.

0:50:16 MA: Thank you. So, if they have... Yeah, submit that to the AAQ just so we can make sure we've got that covered.

0:50:22 BR: There was like three of those that came in in rapid fire. I don't know if they're all from the same community, but that answer applies to all of you [chuckle] who asked that same question.

[chuckle]

0:50:30 MA: Okay. So, I'm going to turn it over to make sure we have enough time for our community presenters here. I will take a look at the questions that came in, it looks like a bunch came in. So, I'll look at those questions here momentarily. But for right now, I want to turn this presentation over, and we're going to start with Kanika Mahajan from Santa Maria, Santa Barbara County, California 603. And then once she's complete we're going to have Michael Nitsch from New Mexico talk about their coordinated entry project. So, I'm going to put it on Kanika's slide. Kanika, are you there?

0:51:19 Kanika Mahajan: Yes, I'm here.

0:51:21 MA: Okay, perfect. So, I'm going to turn it over to you. Thank you so much.

0:51:26 KM: Hi everyone. As Meredith mentioned, I'm Kanika Mahajan and I'm the Housing Data and Program Analyst here with the homeless assistance programs at the county of Santa Barbara. And today I'm going to talk a little bit about our implementation of the new CE data elements, and our coordinated entry program structure. So, to start off, I just wanted to mention a little bit about what our CES implementation looks like currently. So we are a no wrong door CES implementation system, which just means that we have multiple housing providers or agencies across the whole Continuum of Care that serve as coordinated entry system entry points, and clients who want to access the coordinated entry system can come to any of these entry points and the providers can enroll them in the coordinated entry system.

0:52:13 KM: So, this is how we are set up, and based on the structure, we decided that the best fit for our community probably would be a single coordinated entry project that could be accessible to all the coordinated entry system entry points. So, that means that we will be inclined towards having one CES project, and all these providers across the whole continuum who are serving as the CES entry points will have access to this one project and they will be able to enroll the clients in this new project and collect the relevant new CE data elements. So that was a little bit about our structure, how we are planning to structure the collection of these new coordinated entry data elements. And now I'm going to talk a little bit about this screenshot on the slide that we have in front of us.

0:53:09 KM: So, this screenshot is from the previous HMIS leads call, and this is literally what we used to model our new coordinated entry program. So, I feel like it's a really powerful graphic because it does help you visualize how your single coordinated entry project would look like and what are the data elements that you need to collect as part of this program. And towards the right is a little bit about our workflow. So, this is what we've been training on and we are planning to train our providers as to what workflow they would follow as they're enrolling clients in this new CE project. So, we feel like when clients show up at these multiple entry points across the whole Continuum of Care, it could be a brand-new client or it could be an existing active client, a client who's already part of the coordinated entry system.

0:54:09 KM: So, looking at a new client, a completely brand-new client, never been part of the coordinated entry system but needs to be assessed and maybe, depending on what the assessment is, maybe needs to be enrolled in the coordinated entry project. So, in this particular scenario, we've been trying to emphasize to our providers that, "Please follow your program specific workflow first, which means follow your protocols, do your HMIS intakes, and just complete that first. We're not touching anything there." I feel like this has really helped us avoid any sort of confusion and dramatic changes to the workflow. And once they've finished their program specific workflow, then assess the client for the CE intervention. And if it deems suitable, enroll these clients in this new coordinated entry single project that they will have access to. And as part of the enrollment, the intake they do in HMIS, it will enable them to collect the 4.19 and 4.20 data elements.

0:55:08 KM: So, this process is sort of a little straightforward when there's a brand-new client, but when thinking through, we thought it's going to be a little... It's going to look a little different with existing active clients within our coordinated entry system. So, we tried to define for our providers what would be the trigger for enrolling a client, an existing active client in this new coordinated entry project. And I feel like as we go fully live, and as we keep collecting data, we'll get some more insights into this. But we feel like any new CE assessment or a new coordinated entry event would define for providers that this is the trigger for them to enroll these existing clients into the

new CE project. And once they decide to enroll, the workflow is pretty much going to be the same as they do with a new client, go ahead and complete the intake and collect the 4.19 and 4.20 data elements.

0:56:08 KM: So, where we are in this process as of now, so in December 2019 we went live by making these 4.19 and 4.20 data elements live with our existing coordinated assessment projects, which were with our CES lead agencies. So they already had a couple of coordinated assessment projects, so we decided that it would be really good if we pilot them by making it live just for the coordinated assessment project and see how the process is and try to figure out or troubleshoot any issues that come along the way. And the plan eventually is to go fully live by making this coordinated assessment project accessible to all the entry points across the whole continuum by April 1st.

0:57:01 KM: So that's pretty much what is our plan. And we've been training our HMIS users who serve as the entry points, we've been training them along with the new 2020 data standards on this new single project, and how to collect 4.19 and 4.20. And I feel like it'll be really helpful to mention couple of issues, or a couple of concerns that had come up while we were thinking through the process and getting feedback from providers. So the first thing that we ran into when we initially brought this concept to the providers that, "You're going to have a new single CE project and you would have to enroll any new clients or existing active clients in this new CE project", there were some concerns that it would mean that they would have to do additional data entry, which might increase their burden. But thankfully we have an open HMIS implementation system, and emphasizing that... Emphasizing providers that, "Please, complete your program specific index first", has really helped us address that concern. Because being with an open HMIS system, the data would automatically populate when they go in and do this new CE program intake.

0:58:20 KM: So, I feel like we addressed that concern. And I think the second thing that came up, which I'm pretty sure a lot of the communities out there have faced or would be facing, would be what to do with the existing data that you're already collecting which now needs to be mapped to these new data elements. So, like in our case, we were already collecting part of 4.19, our housing needs assessments, we were already collecting it even before the new data elements came live. So, we really had to think through what would be the best way to seamlessly integrate these existing elements with the new CE elements without making a lot of major changes in the workflow. And I think this does involve training your providers exactly how to capture 4.19 and 4.20 in case you have some other data elements that have been mapped, or you cannot automatically map them. So definitely some work that we had to do there.

0:59:25 KM: And lastly, and this is still an ongoing area that we're trying to better define for our community, is recording the 4.20 with the CE event data element. So, it was pretty evident when we were training, and that... And we are anticipating that some of the providers might get confused as to which event to select, and how to gauge the outcome of that event. Because that means that they would have to self-collaborate with the other provider that they are referring to. And we just started doing referrals in HMIS, we were not doing them historically, so it's sort of a new concept for us. But we did realize that this is like a program-level thing, and we involved our CES lead agency and some providers to come up with a training module, or define better for HMIS users how to navigate these clients through the system, what events to select, and how to collaborate together to gauge the outcomes, to accurately complete the 4.20 data element.

1:00:33 KM: So, I think the main takeaways... Just to conclude, some main takeaways from this process that we've learned so far, was that it was really helpful not to disrupt the provider specific workflow that they have been following, but then try to clearly define for them when to enroll clients in the new CE project. And I feel like many times just giving them a little bit of context, a little bit of rationale as to why we are recording these elements, instead of just saying that we have to do it, sort of gives them a sense of understanding of how interlinked these are, to exactly understand our CES system, or to answer questions like how many touches we need to successfully exit a client for our system. I feel like that has been really helpful for the community providers. So that's pretty much what I wanted to cover. Meredith?

1:01:28 MA: Great. Thank you so much, Kanika. Just really quickly, we had a couple of questions I want to run by you, or couple of comments. Someone had asked about your project setup. And just to confirm, you have a single coordinated entry project in your system that multiple people from multiple project types are accessing, is that correct?

1:01:50 KM: Yes, yes.

1:01:51 MA: Okay.

1:01:51 KM: That's correct. Yeah.

1:01:53 MA: Okay. Also, we had at least one person ask for your contact information. If you are willing to share that information, that would be super helpful. And if you could just put it in the Q&A box, we can make sure that gets shared to folks if they had further questions or wanted to reach out to you.

1:02:09 KM: Sure, I'll be happy to share my email.

1:02:13 MA: Okay great. Well, thank you so much, Kanika. It's really interesting to hear how... You know, there's one community's take on how they're implementing this, and hopefully that information is helpful, for just context if nothing else, for other folks. So, thanks. And then next, I'm going to turn it over to Michael from New Mexico, who is going to talk us through their coordinated entry set up. Michael.

1:02:40 Michael Nitsch: Yes, can you hear me?

1:02:42 MA: I can. Thank you.

1:02:43 MN: Great. Hi everyone, this is Michael Nitsch, I'm with the New Mexico Coalition to End Homelessness, in New Mexico. We are the HMIS leads for NM-500 which is the City of Albuquerque, and then 501, which is the Balance of State. I'm just going to give a little overview of how our coordinated entry system has been interacting with HMIS in recent years, and then I'll talk a little bit about what we've been doing to plan for the new elements in the April 1st deadline. So, in terms of our current setup, each of our two CoCs has several coordinated entry project setups in HMIS, and that has been the case for several years now. When I say project setups in HMIS, I mean Type 14, according to the project type numbers and the data standards. And all assessment and referral information connected to the coordinated entry has been entered into one of these projects. The projects have CoC funding, and so we don't have a single project in the way that Kanika was

describing, but we don't have coordinated entry data that's being entered into non-coordinated entry project types. And in terms of preparing for the new elements, when the elements came out and the data standards were released, we realized that much of what's in 4.19 and 4.20 corresponds to information that we've already been collecting.

1:04:10 MN: So, we've been collecting assessment information along with some information about that assessment in HMIS for several years now. And we've also been collecting referral information and have an HMIS driven workflow that has been in place. We realized though that not every single field in the new element corresponds to things that we've been collecting. The main example here is some of the dependent fields in 4.20 for coordinated entry event. There are just things that are specified in the data standards that don't correspond to anything we've been collecting so far. So in terms of what we've done to plan and what we're still doing, our main starting point was just to create a list using the data dictionary information from our vendor about all of the fields that are part of 4.19 and 4.20, and that are going to appear in those elements in our HMIS implementation. And just to go through in a very straight forward way and make a list of the things that we're collecting and how it maps on, if at all, to these new fields. As I mentioned, in most cases, we found that we were already collecting something that maps on quite straightforwardly.

1:05:28 MN: There are a couple of fields where we don't have that relationship. Our plan for data migration. So, I noticed in the comments that Brian had mentioned that there's no back-entry requirement. In our case though, our coordinated entry staff is already using HMIS driven reports to manage a lot of their coordinated entry work, including things like prioritization lists. And so, the call that they made was that it was going to be important for them to have after April 1st all assessment information and all referral information in the same data element within HMIS. And as a result, we're going to be migrating information for existing assessments and open referrals over the next couple of weeks leading up to April 1st, so that by the time April 1 get here, for new clients, we can start entering... Or for new referrals and assessments, we can start entering that information in as we get it. And for existing clients or existing referrals and assessments, we'll have one data type that we can look to for assessment information, and one data type that we can look to for referral information. One question, we had been originally anticipating doing that with our vendor, but it looks, actually just over the last week or so, like our coordinated entry projects think that it's going to be manageable enough just to do that migration the old fashion way by hand and kind of plowing through stuff.

1:07:04 MN: So we're working with them to make sure that we have a plan for that, but that's a decision that they made, again, to ensure that the larger workflow that's connected to the CE data and HMIS has continuity and is usable once we get to the April 1st deadline. In terms of other training and steps we need to take, because we're mostly collecting already what the new elements require, we're not anticipating a huge amount of reworking, but some forms are going to need to be changed, and staff will obviously need to be trained as well in these minor new elements. That's something that's going to be driven mainly by coordinated entry staff with HMIS input and assistance. And finally, I mentioned that our prioritization lists are currently generated in HMIS, and because of the new elements, those are going to need to be reprogrammed in some ways just so that they're pointing in the right places once things migrate over into 4.19 and 4.20. Again, the way that our workflow is set up, that's largely going to be a function of the coordinated entry staff who are able to access the programming for those lists, themselves, but will involve some HMIS input and help. I think that's it in terms of the overview.

1:08:26 MA: Okay, great. Thank you so much for presenting that information. That's very helpful. Any questions or anything? I was looking at some other ones. Brian, were there any additional questions that came in?

1:08:39 BR: Nothing specifically. But, Michael, some of the folks also wanted your contact information to say, "Oh, I want to pick your brain afterwards."

1:08:44 MN: Sure, yeah. I'll type that in now.

1:08:48 BR: Thank you very much.

1:08:49 MA: Great. Yeah, thank you. Okay. Sorry, I'm just scrolling through a couple of these questions here. Is there anything that needs to be elevated that you've seen, Brian, from coordinated entry questions in general that we need to talk through?

1:09:18 BR: There's a lot of very specific community questions that I'm not sure would be best suited for everybody on here. So, for those obviously, there's the AAQ that everybody can submit into. Nothing right now that jumps out at me. We've got a couple of open ones right now. I'll go through and see if I can find any.

1:09:43 MA: Yeah, okay. So, we...

1:09:45 BR: And just to say, if we don't answer anything on the webinar today, we have a log of all of these, and we will answer them. They'll be in the questions document that accompanies the webinar once we upload it to the hub.

1:09:57 MA: Yes. And just as a reminder, up here on the screen we've put out where all these different resources are located on the HUD Exchange, there's a number of links there. Also, if you have someone who has not yet been added to the sys admin hub that needs to be, let us know by emailing HMIS.CloudburstGroup.com and we can get that person added. We're going to sit here at least for a couple of minutes here and answer some of these questions. I know I have several sitting out here that I'm going to do my best to answer. And so, I think though that is the end of our content for today's call. Oh, and Mary wanted me to tell you her joke for today. You know she loves a good joke, even though she couldn't be on the call. So, before we wrap up and just sit here and [chuckle] answer questions quietly, her joke was: What cheese goes around a castle? Moatzzarella. Wah, wah. So, [chuckle] there's Mary's cheesy joke for the day.

[laughter]

1:11:08 MA: So, thank you all so much for joining us. We're going to sit here, like I said, for the next however long it takes for us to get through some of these questions. You're welcome to stay on and wait for an answer to your question, but otherwise we will talk to you all again next month. Thank you.

1:11:28 JB: And an extra special thank-you to the community providers for coming and sharing their experience. We really appreciate that a lot.

1:11:37 MA: Definitely. Alright, thanks all.

1:11:41 FL: Thank you, everyone.

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