Data & Performance Management Meeting

October 10, 2019
Data Quality Roadmap

- Updating Data Quality Plan to provide overview of the components of data quality, and adding appendixes with guidance on how to improve each component
- Update Data Completeness thresholds for Universal Data Elements and Program Specific Entry Data Elements
- Publish Data Completeness Report Cards on quarterly basis
- Create HMIS Cheat Sheet document and possibly video for data consistency
- Update HMIS part 2 training to include a “hands on” component in the HMIS training site that will be graded for accuracy
- Create Data Accuracy dashboard and provide instructions for reviewing data
- Develop process for data completeness and performance to be reviewed on a quarterly basis and brought to the D & PM Committee for review
- Develop Data Completeness and Timeliness thresholds for Coordinated Entry
- Develop Data Timeliness thresholds for each project type? Currently 3 days for all
**Data Completeness Thresholds**

- Data completeness measures the percentage of data elements with a valid and complete response entered.
- Valid responses are those included in the current HUD Data Standards.
- Missing responses are Client Doesn’t Know, Client Refused, and Data Not Collected. No Exit Interview Completed is also a missing response for Destination.

### Universal Data Elements

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Data Completeness 7/1/19 - 9/30/19</th>
<th>Current Threshold</th>
<th>Proposed Threshold*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter</td>
<td>99.00%</td>
<td>90%</td>
<td>98%</td>
</tr>
<tr>
<td>Homeless Prevention</td>
<td>98.38%</td>
<td>95%</td>
<td>98%</td>
</tr>
<tr>
<td>PH - Housing Only</td>
<td>99.92%</td>
<td>95%</td>
<td>98%</td>
</tr>
<tr>
<td>PH - Permanent Supportive Housing</td>
<td>99.67%</td>
<td>95%</td>
<td>98%</td>
</tr>
<tr>
<td>PH - Rapid Re-Housing</td>
<td>98.85%</td>
<td>95%</td>
<td>98%</td>
</tr>
<tr>
<td>Services Only</td>
<td>92.81%</td>
<td>85%</td>
<td>95%</td>
</tr>
<tr>
<td>Street Outreach</td>
<td>92.34%</td>
<td>85%</td>
<td>95%</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>99.02%</td>
<td>95%</td>
<td>98%</td>
</tr>
<tr>
<td>CoC</td>
<td>96.52%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program Specific Data Elements - Entry

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Data Completeness 7/1/19 - 9/30/19</th>
<th>Current Threshold</th>
<th>Proposed Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter</td>
<td>99.11%</td>
<td>90%</td>
<td>96%</td>
</tr>
<tr>
<td>Homeless Prevention</td>
<td>88.36%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>PH - Housing Only</td>
<td>97.76%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>PH - Permanent Supportive Housing</td>
<td>98.17%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>PH - Rapid Re-Housing</td>
<td>96.13%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>Services Only</td>
<td>46.67%</td>
<td>85%</td>
<td>90%</td>
</tr>
<tr>
<td>Street Outreach</td>
<td>85.29%</td>
<td>85%</td>
<td>90%</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>99.11%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>CoC</td>
<td>85.55%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*UDE Threshold excludes SSN so projects are not punished for serving undocumented clients*
Sharing Case Notes

• In order to move forward with sharing case notes in HMIS, case notes should first be standardized to ensure information is being shared that doesn’t violate the client’s privacy or creates a negative bias against the client.

• Some agencies are using DAP format for case notes:
  - **Data**: Observable and identifiable behaviors and traits; “What did I see during the session?”
  - **Assessment**: “What does the data mean?”
  - **Plan**: “What will I do in light of the Assessment?”

• Concerns:
  - Data includes observations, which could lead to bias against client.
  - DAP was developed by and for licensed therapists and the majority of HMIS users are not licensed mental health professionals.
Sharing Case Notes

Template Draft

• What was discussed during the visit? This should include facts only; no opinions of the case manager
  ○ Should this be broken down into categories?
    ▪ Physical health, mental health, housing, income, other
  • What are the action items as the result of the visit?
ES Project Performance Reports

• Project-level reports are available on our website

• Reporting period: 9/1/18 – 8/31/19
Average Length of Stay

The average number of days between the client’s Project Start Date and their Project End Date, or the last date in the reporting period if not exited. For Night-by-Night (NBN) shelters, this is the number of bed nights provided between Project Start and Project End Date, or last date in the reporting period if not exited.

This measure is included in the System Performance Measures report submitted to HUD.

Ensure the client’s Project Start and End Dates are accurate in HMIS. Night-by-night projects should ensure bed nights are entered for each client for every night the client stayed in the project.
Average Length of Homelessness

The average number of days between the client’s Approximate Date Homelessness Started and their Project End Date, or the last date in the reporting period if not exited. For NBN shelters, this is the days between the client’s Approximate Date Homelessness Started and the Project Start Date plus the client’s LOS.

This measure is included in the System Performance Measures report submitted to HUD.

Approximate Date Homelessness Started
- The date of the start of the client’s current episode of homelessness. To correctly capture this data, it may help to ask clients the last time they were in permanent housing, and the date that housing ended. This would be the client’s Approximate Date Started.
Entries from Homelessness

The percentage of entries from homelessness (including transitional housing) for HoHs.

This data is not submitted to HUD as part of any performance reports, but was included in the PPR as a local decision.

Neutral entries (excluded from measure):
• Clients currently fleeing from DV
• CH clients entering from non-homeless situations
• Clients entering from institutional settings where LOS was less than 90 days and client was homeless prior to entry

If homelessness is not an eligibility criteria for entry into your project, please contact the HMIS Help Desk to change your project type to “Other”
Unit Utilization

The percentage of beds/units occupied during the reporting period.

This data is not submitted to HUD as part of any performance reports, but was included in the PPR as a local decision.

Ensure the client’s Project Start and End Dates are accurate in HMIS. Night-by-night projects should ensure bed nights are entered for each client for every night the client stayed in the project.

Verify that the beds and units reported for the project are correct. If the beds in the project were not available for the entire reporting period, please notify the HMIS team.
Stayers with Increased Income

The percentage of adults with increased income who were active in the project at the end of the reporting period with a length of stay of at least one year.

This data is not submitted to HUD as part of any performance reports, but was included in the PPR as a local decision.

Create a process at your agency to ensure income is collected at entry, annual assessment, and exit.

211OC has created a Look that will include clients that require an annual assessment to be completed. Please enter a ticket with the HMIS Help Desk to request the report to be sent to your agency automatically on a monthly basis.
Leavers with Increased Income

The percentage of adults with increased income who exited during the reporting period.

This data is not submitted to HUD as part of any performance reports, but was included in the PPR as a local decision.

Create a process at your agency to ensure income is collected at entry, annual assessment, and exit.

211OC has created a Look that will include clients that require an annual assessment to be completed. Please enter a ticket with the HMIS Help Desk to request the report to be sent to your agency automatically on a monthly basis.
Successful Exits

The percentage of exits to permanent housing destinations.

This measure is included in the System Performance Measures report submitted to HUD.

Neutral exits (excluded from measure):
- Deceased
- Hospital
- Long-Term Care Facility
- Foster Care

Ensure that “Other” is not selected as a destination for any of your clients, as this is not considered a successful exit.
Returns to Homelessness

The percentage of clients that exited to permanent housing in the last two years and later returned to a project targeting homeless clients in HMIS.

This measure is included in the System Performance Measures report submitted to HUD.

Prior to exiting clients from the project, meet with clients to determine whether or not they will be able to sustain their current housing, and make arrangements if possible.
Measures Met by Project

- Average measures met in October: 3
- Most commonly met measure: Returns to Homelessness
- Most challenging measure to meet: Average Length of Stay
- Measures included in analysis:
  - Average Length of Stay
  - Entries from Homelessness
  - Successful Exits
  - Stayers with Increased Income
  - Leavers with Increased Income
  - Returns to Homelessness
  - Unit Utilization
Emergency Shelter Project Performance Reports

9/1/18 - 8/31/19

Measures
Average Length of Stay
Average Length of Homelessness
Entries from Homelessness
Unit Utilization
Stayers with Increased Income
Leavers with Increased Income
Successful Exits
Returns to Homelessness
Increased Income for Stayers
9/1/2018 - 8/31/2019

American Family Housing - Washington House (n = 6) 33%
Wise Place - Safe Place (n = 18) 17%
Mercy House - Bridges at Kraemer Place (n = 31) 10%
Midnight Mission - Courtyard (n = 333) 0%
Friendship Shelter - Bridge Housing Program (n = 1) 0%