

2009 HMIS Report

Prepared for the HMIS Committee – July 2, 2009



Introduction

Each year, as part of the competitive process to secure HUD funding for Homeless Assistance programs, continuums of care across the country are required to complete an application that demonstrates a CoC's organizational capacity and performance. Part of this application analyzes a CoC's ability to have an understanding of its homeless population at any given time through its use of HMIS. This report is being provided to the HMIS Committee of the Chicago Planning Council on Homelessness. It details information regarding Chicago's HMIS as it relates to the HUD application, and also provides feedback from HMIS users on the implementation of HMIS.

2008 HUD NOFA – Homeless Needs and Data Collection Section

For the 2008 NOFA, HUD changed the scoring allocation from previous years, placing a greater emphasis on Part II: Homelessness Needs and Data Collection, which scores continuums on the implementation and usage of HMIS, as well as execution of the point-in-time count. It was the only section of the application to increase in value, from 20% of the total points in 2007 to 24% in 2008.

Homeless Needs and Data Collection Point Allocation

Although HUD does not provide a point breakdown for the questions listed on the application, they release a national debriefing document that offers an overview of the points awarded for each section. The majority of points in the Homeless Needs and Data Collection section were devoted to HMIS questions, with the remaining points awarded based on questions related to the point-in-time count. HUD awarded points based on the extent to which a CoC's application demonstrated:

- An understanding of the number of homeless individuals and families within the CoC and their needs, including an accurate and timely count of sheltered and unsheltered homeless persons. The frequency and methods used to conduct the point in time count of sheltered, unsheltered and subpopulations were considered.
- Progress in the implementation and operation of an HMIS, including data quality and usage, bed coverage (excluding domestic violence providers), Data Standards compliance and HMIS training.
- AHAR participation assessed by the number of table shells included in the 2007 AHAR. It was not a requirement that CoC-wide data be used; table shell data from at least one jurisdiction within the CoC qualified the entire CoC as participating in AHAR. The greater the number of table shells used in the 2007 AHAR, the higher a CoC's score.

Homeless Needs and Data Collection Summary of National CoC Results

In addition to providing an overview of the point breakdown, HUD also provides general comments addressing the national competition. This year's summary of CoC results for this section are as follows:

- Although most CoCs indicated an HMIS implementation date prior to October 2006, most CoCs demonstrated low bed coverage on one or more of the housing types. CoCs should strive to have 86 percent or more bed coverage for each housing type within the CoC.
- Many CoCs lost points for either not participating in AHAR or for having a high percentage of null or missing values.

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- Although a point-in-time count is only required every two years, many CoCs conducted a point-in-time in 2008 as well. CoCs that indicated a date outside of the last 10 days of January (2007 or 2008) should have received a waiver from HUD.
- CoCs were asked to describe methods used to collect data on sheltered and unsheltered populations and subpopulations. Failure to address each question separately resulted in a loss of points. Responses should have demonstrated consistency with HUD's point-in-time guidelines.

2008 Homeless Needs and Data Collection – Chicago Score and National Comparison

Chicago received a score of 14.25 out of 24 points (59.4%) for the Homeless Needs and Data Collection Section of the 2008 HUD NOFA application; the national average was 16. In order to help identify areas where Chicago could improve its score for the 2009 HUD competition, Alliance staff collected Exhibit 1 applications and scores from other CoC's, and compared Chicago's answers for the HMIS-related questions to CoC's who scored well on the HMIS section of the application, paying special attention to CoC's of similar size to Chicago. Through this analysis, Chicago's CoC can hopefully gain a better understanding of some of the HMIS best practices being implemented throughout the country and use that information to better its HUD NOFA score on future applications.

Each section below correlates with a portion of the HUD application, and provides information on the questions HUD asks, Chicago's response and a summary of other CoC responses. Please refer to Appendix 1 for the complete Homeless Needs and Data Collection section of Chicago's 2008 HUD NOFA application.

Homeless Management Information System Implementation

Chicago's HMIS implementation type is "Single CoC" meaning our lead organization is implementing HMIS for Chicago's CoC only. Though some CoC's have a statewide or regional system encompassing multiple CoC's, a single CoC type is the most common among the top HMIS performers. Also common among the top HMIS performers is having the same organization be the HMIS and CoC lead organization. For Chicago, DFSS is the lead HMIS organization whereas the CoC lead organization is the Chicago Alliance to End Homelessness.

In the NOFA application, HUD asks CoC's to identify challenges and barriers that have impacted the HMIS implementation from a menu of options. Chicago identified the seven issues listed below, which was more than the other top HMIS performers.

- No/low participation by non-HUD funded providers
- No CoC formal data quality plan
- HMIS unable to generate unduplicated count of homeless persons
- HMIS unable to generate CoC-wide data or reports
- HMIS is unable to generate data for PIT counts for sheltered persons
- HMIS unable to generate AHAR table shells
- HMIS unable to generate APR data

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HUD also asked CoC's to describe plans to overcome these barriers. Chicago indicated that many barriers would be solved with the transition to ServicePoint, which would allow report generation for AHAR and CoC-wide data, as well as the ability for agencies to use the system to track client information. Additionally, Chicago indicated that trainings and technical assistance from DFSS and Abt Associates would help agencies transition to the new system.

The majority of the CoC's researched, including Chicago, selected "No/low participation by non-HUD funded providers" as a challenge to HMIS implementation. Plans to address this issue for other CoC's included: meeting with non-HUD funders (private and government) to encourage HMIS involvement, creating "progress cards" as an incentive for involvement, and adding language to city contracts that requires participation.

Additionally, CoC's often described their plans to overcome the issue of poor data quality, including:

- using ShelterPoint for agencies to be able to enter and exit a large number of clients at the same time
- encouraging agency administrators to run quality reports often and distribute to end-users
- job aids and peer coaching
- providing CoC-wide reports to HMIS committee and governing body in an effort to continually improve system and involvement
- implementing a data quality plan

Bed Coverage Rates

Alliance staff discovered a correlation between the bed coverage rates and a CoC's score on the Homeless Needs and Data Collection section, with higher bed coverage rates leading to higher scores. In a presentation by HUD, they identified that a bed coverage rate of 86% or greater is expected. Chicago's rates for each program type are shown in Table 1.

Table 1: Chicago's Bed Coverage Rates				
CoC	Emergency Shelter Beds	Safe Haven Beds	Transitional Housing Beds	Permanent Housing Beds
Chicago	0-50%	86+%	76-85%	65-75%

For coverage rates below 64%, the 2008 HUD NOFA application required an explanation of the CoC's plans to increase this percentage in the next 12 months. Chicago indicated that the 0-50% coverage rate for emergency shelter beds is due to the fact that one very large emergency shelter, accounting for more than 40% of the emergency shelter beds, is not participating in HMIS. A plan is in place to bring them on board in the next year through the use of ScanPoint technology, which provides identification cards to emergency shelter users, automating the client entry and exit HMIS process. Additionally, the Lead HMIS Organization indicated that the ServicePoint system will greatly increase data quality so agencies will be able to use the system to track client demographics and generate reports, and thus incentivizing participation in HMIS.

HUD also asked how often the CoC reviews or assesses its HMIS bed coverage. All of the top 8 HMIS performers we examined carry out this task on at least a semi-annually basis, with most of them doing it monthly. Chicago reviews its bed coverage rates annually.

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HMIS Data Quality

HUD uses the percentages of records with no values and records where values are unknown or refused, to assess continuums' data quality. There does not seem to be a direct correlation between scores and higher percentages of records with no values, or for records with values that are unknown or refused. Seven out of the eight CoC's participated in AHAR 3 and 4, though one high-scoring CoC did not participate in either. One possible explanation is that, as HUD indicated in their debriefing, they value progress on a CoC's implementation and data quality improvement plan, not just the current HMIS usage and participation in AHAR.

HUD also asks about the frequency each CoC reviews the quality of client and program level data. Chicago indicated that the lead HMIS organization does this monthly, which matches what other CoC's are doing.

In the 2008 NOFA application, HUD asked CoC's to provide a narrative on how the CoC continually seeks to improve data quality. Chicago's response indicated that the HMIS lead agency has developed HMIS data quality reports to monitor usage levels, the entry of universal data elements, and entry/exit dates. These reports are distributed to end-users to ensure they remain compliant with HMIS data entry standards. Additionally, Chicago noted that the new software program will require all universal data elements to be entered for each client, hopefully bringing the percentage of missing values to zero. Finally, report generation at the agency level was mentioned as another element of the data quality improvement plan, enabling agencies to monitor their own usage and data quality instead of relying on the HMIS lead organization.

Many data quality improvement responses from the top HMIS performers are similar to Chicago's efforts, while others may provide new ideas and include the following:

- providing data quality reports to agency's and end users and monitoring reports to identify common errors
- training users to run reports to monitor their own data quality; training manuals for entering data; help desk (via phone/email) during week for end-users and administrators; tailor trainings to focus on items identified through reports as common errors or missing elements; on-site training; monthly end-user groups to identify common problems; FAQ section accessible via internet
- system de-duplication efforts through merging similar records
- incorporating HMIS data quality standards in contractual requirements
- requiring all the universal data elements to be entered upon intake
- making HMIS system user friendly for agencies so they will want to improve and monitor their own data quality
- logic-checking to ensure data quality (HMIS reports for agencies that serve singles only should not have children, for example)

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HUD also inquires about how CoC’s ensure program entry and exit dates are recorded in HMIS. Chicago’s response indicated that the HMIS lead agency generates reports that show entry and exit information, flag invalid records, and distribute these reports to agencies. They then provide technical assistance to agencies on the issue. The HMIS lead agency indicates that after transitioning to the new system, they will continue to routinely “monitor data quality and ensure valid entry and exit dates.”

Other CoC’s responded with a variety of policies and procedures regarding entry/exit dates, such as:

- requiring programs to submit accurate reports on a regular basis; requiring programs to submit an accurate HUD APR as part of the grant renewal process
- providing a manual with instructions on how to properly enter and exit a client
- generating and distributing reports to agencies to compare input with expected agency characteristics and performance standards, such as comparing HMIS bed usage for a program to the number of beds allocated to the program; creating data quality reports that automatically check for validity, and flag items such as exit dates before entry dates, and a bed capacity rate outside the range of 70%-120%
- testing HMIS data with client hard copy files through random site visits

HMIS Data Usage

HUD asks CoC’s to indicate the frequency in which the CoC uses the items listed in Table 2. This table lists the item, how often Chicago uses the item, and how often the top HMIS performers use each item. Shaded boxes indicate the majority response for this question for the 8 CoC’s studied.

Table 2: Data Usage							
	Chicago	Never	Monthly	Quarterly	Semi-Annually	Annually	
Data integration/data warehousing to generate unduplicated counts	Never	12.5%	50%	25%	12.5%	0%	
Use of HMIS for point-in-time count of sheltered persons	Never	0%	25%	12.5%	12.5%	50%	
Use of HMIS for point-in-time count of unsheltered persons	Never	50%	0%	0%	0%	50%	
Use of HMIS for performance assessment	Never	0%	37.5%	0%	12.5%	50%	
Use of HMIS for program management	Never	12.5%	50%	0%	0%	37.5%	
Integration of HMIS data with mainstream system	Never	50%	25%	0%	0%	25%	

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HMIS Data and Technical Standards

HUD also asked CoC's to identify what practices are in place for data and technical standards. Table 3 shows how often Chicago uses these standards compared to other top HMIS performing CoC's. Shaded boxes indicate the majority response for this question for the 8 CoC's studied.

Table 3: Data & Technical Standards						
	Chicago	Never	Monthly	Quarterly	Semi-Annually	Annually
Unique user name and password	Quarterly	0%	25%	12.5%	0%	62.5%
Secure location for equipment	Never	0%	12.5%	0%	12.5%	75%
Locking screen savers	Never	0%	12.5%	12.5%	0%	75%
Virus protection with auto update	Never	0%	12.5%	0%	0%	87.5%
Individual or network firewalls	Quarterly	0%	12.5%	0%	0%	87.5%
Restrictions on access to HMIS via public forums	Monthly	0%	12.5%	12.5%	0%	75%
Compliance with HMIS Policy and Procedures manual	Monthly	0%	25%	0%	0%	75%
Validation of off-site storage of HMIS data	Never	0%	37.5%	12.5%	12.5%	37.5%

Additionally, Chicago indicated that it does not aggregate data to a central location (HMIS database or analytical database), whereas the other top performing CoC's completed this task at least annually, with most doing it monthly.

HMIS Training

HUD asked CoC's to indicate how often each of the following CoC's offered these trainings. Shaded boxes indicate the majority response for this question for the 8 CoC's studied.

Table 4: Frequency of Trainings Offered						
	Chicago	Never	Monthly	Quarterly	Semi-Annually	Annually
Privacy/Ethics training	Monthly	0%	37.5%	12.5%	0%	50%
Data Security training	Never	0%	37.5%	12.5%	0%	50%
Data Quality training	Semi-annually	0%	50%	12.5%	12.5%	25%
Using HMIS data locally	Never	0%	25%	37.5%	12.5%	25%
Using HMIS data for assessing program performance	Never	0%	12.5%	25%	25%	37.5%
Basic computer skills training	Never	75%	12.5%	0%	0%	12.5%
HMIS software training	Monthly	0%	37.5%	25%	12.5%	25%

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Evaluation Instrument Feedback on HMIS

Based on a recommendation from the HMIS Committee, the 2009 NOFA Evaluation Instrument requested agencies' comments on the new HMIS system via a question that read:

Did your project and/or agency experience any difficulties or problems with entering or exiting clients from the HMIS system since the “go live” date of October 6, 2008? If yes, please describe any related difficulties and problems. This question will not be scored. Feedback will be provided to the Chicago Department of Family and Support Services and the HMIS Committee.

Fifty-seven (57%) percent of applicants responded “Yes” to the question and provided detailed information about the problems they encountered with HMIS. This feedback has been provided to the HMIS Committee for review and they will work to address the issues encountered by agencies.

Overall, the feedback generally fit into 3 themes: training and technical assistance, data transfer from the old to the new HMIS, and reporting.

Training and Technical Assistance

All users are required to participate in a HMIS training prior to receiving a username and password. However, the feedback often indicated that the trainings were insufficient, poorly organized and executed, and that registration for such trainings was difficult. Some agencies indicated that different types of agencies need to enter program-specific information into HMIS, and the trainings were not tailored for this. Additionally, comments related to the technical assistance provided by the HMIS lead organization were both positive and negative in regards to their responsiveness and ability to correct technical issues.

Data Transfer

Problems with transferring data from the old to new HMIS were mentioned in almost every response; yet most agencies indicated they were already in the process of working with the HMIS lead organization to correct the issues. Issues ranged from losing important data during the transfer, such as unique client identifiers and social security numbers, to information being transferred into the incorrect program within an agency. It was obvious from the feedback that agencies devoted a substantial amount of time and energy to correct these issues prior to the Evaluation Instrument due date.

HMIS Reporting

The 2009 Evaluation Instrument required agencies to run a report from HMIS that detailed the entry and exit data for their program in HMIS. For many agencies, this was the first time they had used reports to analyze data quality. Due to timeline of the competitive NOFA process, agencies often felt they did not have adequate time to learn how to run the reports and resolve any issues discovered. Several programs reports generate inaccurate data, which is largely due to data transfer issues and/or misunderstanding of how to enter data correctly.

Many agencies indicated that it was helpful to see reports on their data, which helps them improve their data quality. Several agencies demonstrated an interest in learning how to run additional reports on their own to use as a measure of data quality on a regular basis. Although no trainings for report

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generation are in existence at this time, the HMIS lead organization (DFSS) has indicated they will be available in the future.

Recommendations

Based on HUD's general debriefing comments, comparing Chicago's score to other continuums who scored well on the Homeless Needs and Data Collection section, and the feedback gathered from the 2009 Evaluation Instrument, Alliance staff would recommend the following practices that could help improve Chicago's score on future HUD NOFA applications for Homeless Assistance Funds:

Evaluation Instrument: Revamp the HMIS section on the Evaluation Instrument to reflect the emphasis HUD places on HMIS implementation, usage and data quality. For 2009's Evaluation Instrument, the HMIS section accounted for 9% of the total 100 points, and awarded points based on the number of staff trained on HMIS, and on the accuracy of a program's entry and exit dates. Alliance staff would recommend that the HMIS section be weighted more heavily among the other sections. Also, additional questions could be added to the section that award points for ongoing training and frequent usage of the system, and low percentage of null or missing universal data element values. Chicago's CoC could also require agencies to provide reports to the CoC lead organization throughout the year instead of on an annual basis as part of the Evaluation process.

Report Generation: Develop a protocol for agencies to review reports on a regular basis, either by having the HMIS lead organization generate reports and distribute them to users (similar to the process used to distribute reports used for the 2009 Evaluation Instrument), or train users to generate their own reports. Reports should be checked against program characteristics, such as capacity and length of stay.

User Group Meetings: Provide peer-to-peer support through regular user group meetings. These meetings could address frequently asked questions and common data entry mistakes while serving as a forum for users to share tips, information and grievances.

Training & Support: Provide regular training on generating reports at the agency level so they can use them for data quality analysis. Develop a protocol for disseminating important information such as software updates, answers to frequently asked questions, and training manuals. Create a document that shows how drop-down selections chosen on the screen directly relate to categories used for the HUD APR report. Incorporate the use of client data into the training instead of having the trainings be "theory-based." Tailor trainings to different program types.

Conclusion

While there is room for improvement, without a doubt, the transition to the new HMIS software provides Chicago's CoC with the capability to increase its data quality and HMIS usage. The feedback from end-users and practices learned from other CoC's is valuable information that can help the HMIS Committee of the Chicago Planning Council on Homelessness bring Chicago's HMIS up to HUD standards.