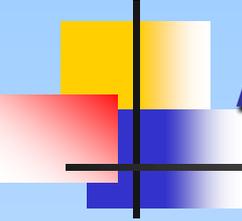


**Using HMIS to Track Outcomes
and
Performance Measurement
Homeless Summit – November 17, 2010**



**Lead Homeless Management Information System Agency
for the
San Bernardino County Continuum of Care**



Agenda

- Introductions
- Community Action Partnership Overview
- In the beginning there was...HMIS
- What data should be collected?
- What is the benefit of data?
- What does it look like?
- Who should participate in HMIS?
- How do you get started?



Teri Blum-Johnston

HMIS Program Specialist I



Me



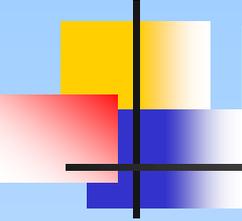
Moto



Husband

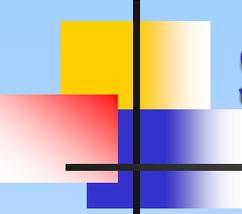


Hannah



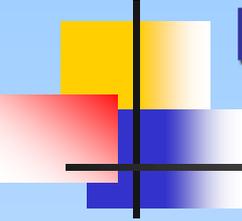
Please Introduce Yourself.

- Please provide the group with the following:
 - Your Name
 - The name of your agency and the location
 - The services your agency provides
 - Your position
 - What would you like to learn from this workshop?



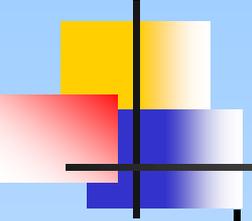
Community Action Partnership of San Bernardino County (CAPSBC)

- CAPSBC is a private non-profit public benefit corporation with a 501(c) 3 status.
- Since 1965, CAPSBC has been implementing programs that address the most crucial needs of low-income residents in San Bernardino County.
- CAPSBC is the HUD grantee responsible for administering the HMIS Supportive Housing Program (SHP) grant and the HMIS Lead Organization.



HMIS Lead Organization for the San Bernardino County Continuum of Care.

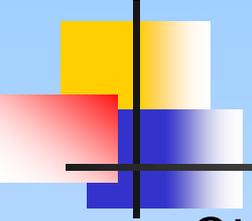
- ✓ Responsible establishing, supporting and managing HMIS in a manner that will meet HUD's standards for minimum data quality, privacy and security
- ✓ Required HUD reporting
- ✓ Participation in field office monitoring
- ✓ Promoting use of HMIS through orientation, user meetings, one-on-one meetings with participating agencies
- ✓ Assisting with Annual Progress Reports
- ✓ Monitoring and promoting good data quality
- ✓ Generating data necessary for CoC application
- ✓ Producing quality AHAR data
- ✓ Participation in HUD PULSE Project



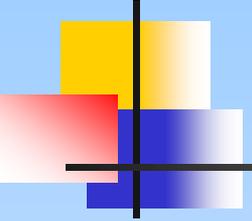
HMIS Historical Overview

- In 2001, Congress directed HUD to provide data and analysis on the extent and nature of homelessness and the effectiveness of the McKinney Act Programs including:
 - Developing unduplicated counts of clients served at the local level;
 - Analyzing patterns of use of people entering and exiting the homeless assistance system; and
 - Evaluating the effectiveness of these systems.
 - HMIS became an eligible activity under the 2001 Continuum of Care NOFA.

HUD Response

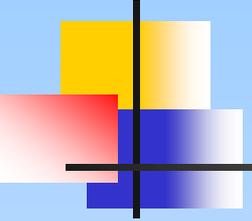


- Standardized methods for conducting traditional one night counts (PITC)
- Designated HMIS as the primary tool to meet Congressional directive for understanding homelessness and measuring program effectiveness.
- Required all McKinney-Vento funded homeless grantees to implement HMIS and use in reporting requirements for:
 - SHP APR
 - SPC APR
 - AHAR
 - HPRP QPR and APR
 - PULSE Project
 - Projects for Assistance in Transition for Homelessness (PATH)



What is HMIS?

- HMIS is a locally administered electronic data collection system that stores longitudinal client-level information about persons who participate in the homeless service system.
- HMIS follows the National Data and Technical Standards published via Federal Register revised in 2010 on established baseline standards for participation, data collection, privacy and security.
- HMIS is HUD's response to the Congressional directive to capture better data.



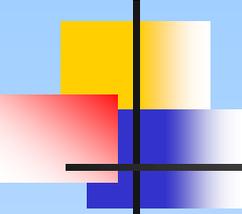
What Data is Collected?

- HMIS records and stores:
 - Client Intake
 - Demographics
 - Basic assessment of needs
 - Bed utilization
 - Service Tracking
 - Services delivered by a provider
 - Services received by clients
 - Gaps in the homeless services in a community

HMIS Universal Data Elements

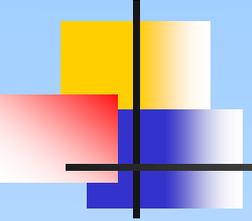
Universal Data Elements (UDE) to be entered in HMIS for all clients and include:

- Name (First and Last)
- Social Security Number
- Date of Birth
- Zip Code of Last Permanent Address
- Ethnicity and Race
- Gender
- Veteran Status
- Disabling Condition
- Housing Status at Program Entry
- Family Type at program Entry
- Program Entry Date
- Program Exit Date
- Unique Person Identification Number (System generated)
- Program Identification Number (System generated)
- Household Identification Number (System generated)



Data Standards Summary

- Establish uniform decisions for the types of data to be collected
- Protocols for when data is collected and from whom data is collected
- Agencies may have additional data elements to collect based on other funding
- HMIS Data Standards Revised Notice of March 2010 can be downloaded by going to:
<http://www.hmis.info/Resources/7523/Final-Revised-HMIS-Data-Standards-March-2010.aspx>



"IF IT IS NOT IN HMIS...

IT DID NOT HAPPEN"

HUD

What Questions Can HMIS Answer for San Bernardino Communities?

- Based on the current utilization of HMIS in our county, how many people are on the streets of in the service system?
- How many are chronically or episodically homeless?
- What are the characteristics and service needs of those served?
- Which programs are most effective at reducing and ending homelessness?

What Questions Can HMIS Answer for the Nation?

- How many people are homeless in the United States?
- Who is homeless?
- Where do people receive shelter and services and where did they live before homelessness?
- What are the patterns of homeless residential program use?
- What is the nation's capacity for housing homeless people and how much is utilized?



Benefits of HMIS

For Homeless Men, Women, and Children

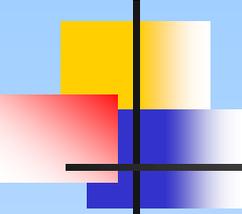
- Decrease in duplicative intakes
- Coordinated Scope of Care
- Identify needs and gaps in services
- Provides client an outline for program completion



Benefits of HMIS

For Homeless Service Providers

- Improve agency effectiveness through tracking client outcomes.
- Coordinate services, internally among agency programs, and externally with other providers.
- Support coordinated Case Management.
- Prepare financial and programmatic reports for funders, boards, and other stakeholders.
- Ability to measure performance of programs.



Benefits of HMIS

For Public Policy Makers and Advocates

- Increase understanding of the extent and scope of homelessness.
- Identify service gaps (i.e. are the services available meeting the needs of clients).
- Inform systems design and policy decisions
- Ability to measure the performance of the community system to prevent and end homelessness
- Develop a forum for addressing community-wide issues

Benefits of HMIS

For the San Bernardino County Continuum of Care

- Provide data for the 10-year Plan to End Homelessness (available services, service gaps, shelter beds, demographics, and many more).
- Serve as a tool to:
 - Coordinate services, track utilization and cost;
 - Evaluate program effectiveness and program outcomes;
 - Identify at-risk populations and prevent homelessness.
- Plan services and programs appropriately to address local needs.
- Comply with HUD's mandate to continue to receive funding.

Benefits of HMIS

For the Point-in-Time Count (PITC)

- HMIS can be used to check on sheltered populations
- Compare PITC with information on HMIS data
- Verify missing or incorrect data



Why Do We Collect *and* Use Data?

- To demonstrate use of funds for future funding opportunities
- To ensure understanding of goals and steps to achieve them
- To solidify a common understanding among stakeholders of what the goal is and how we are going to get there
- To determine if what we are doing is resulting in our intended results
- To target where program improvement is needed
- To communicate and advocate

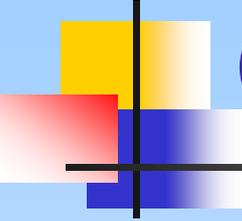
What does your data look like?

- Something like this perhaps?



How fast can you tell the story of your agency?



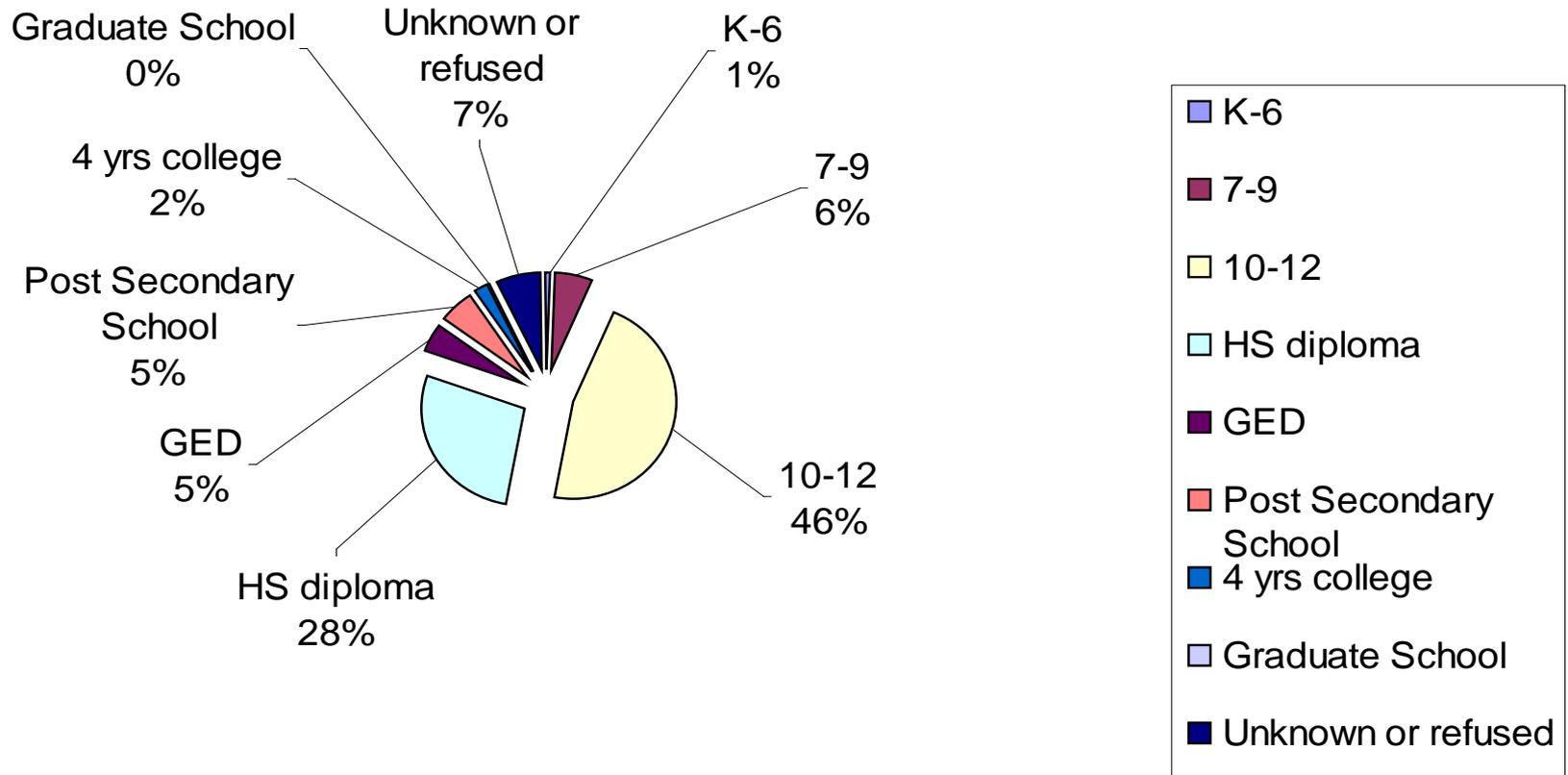


Can you...

- provide a count of clients served each month, each quarter, for the year?
- provide a count of clients who reached the desired outcome/goal?
- provide a count of by household, number of family members, and the ages of the family members?
- provide this to stakeholders, board members or potential funders within a days notice?

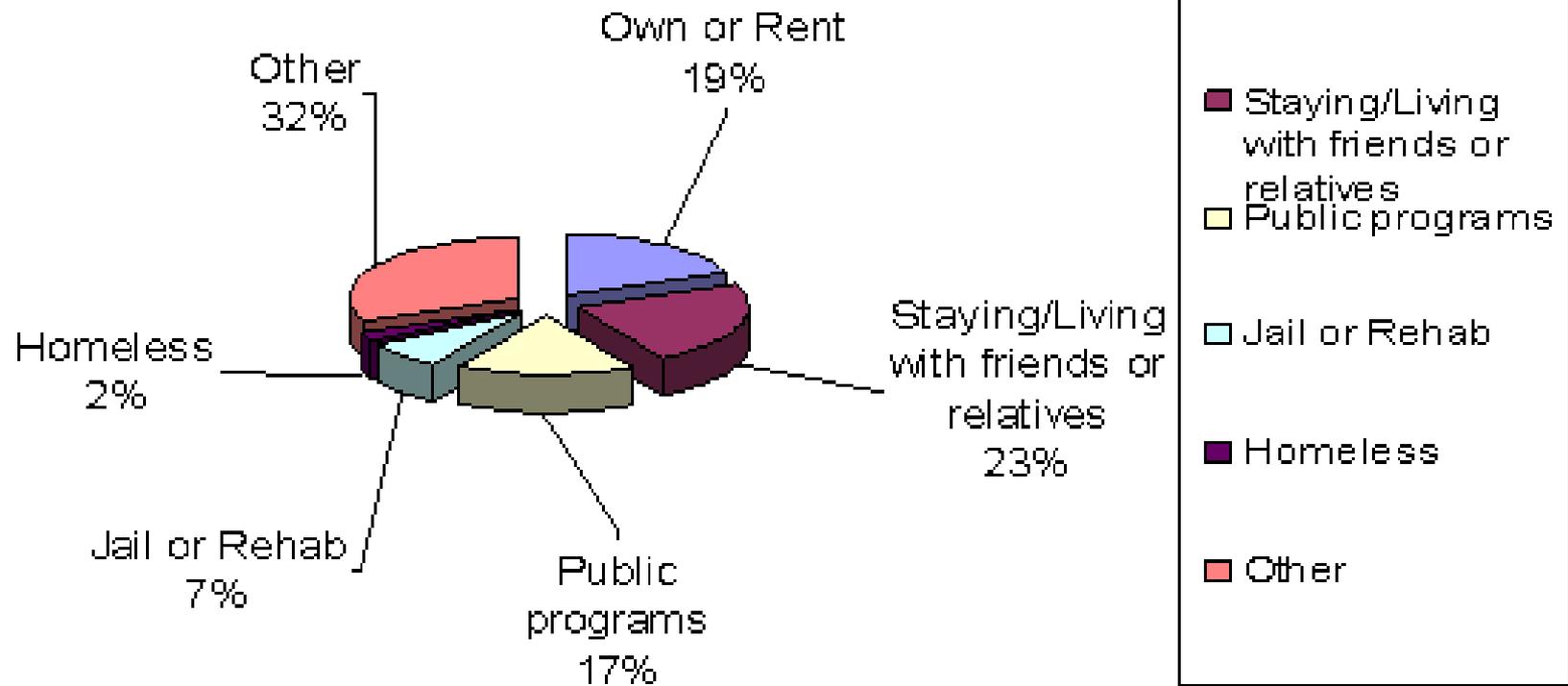
HMIS reporting looks like this...

Education level (adults only), Homeless population



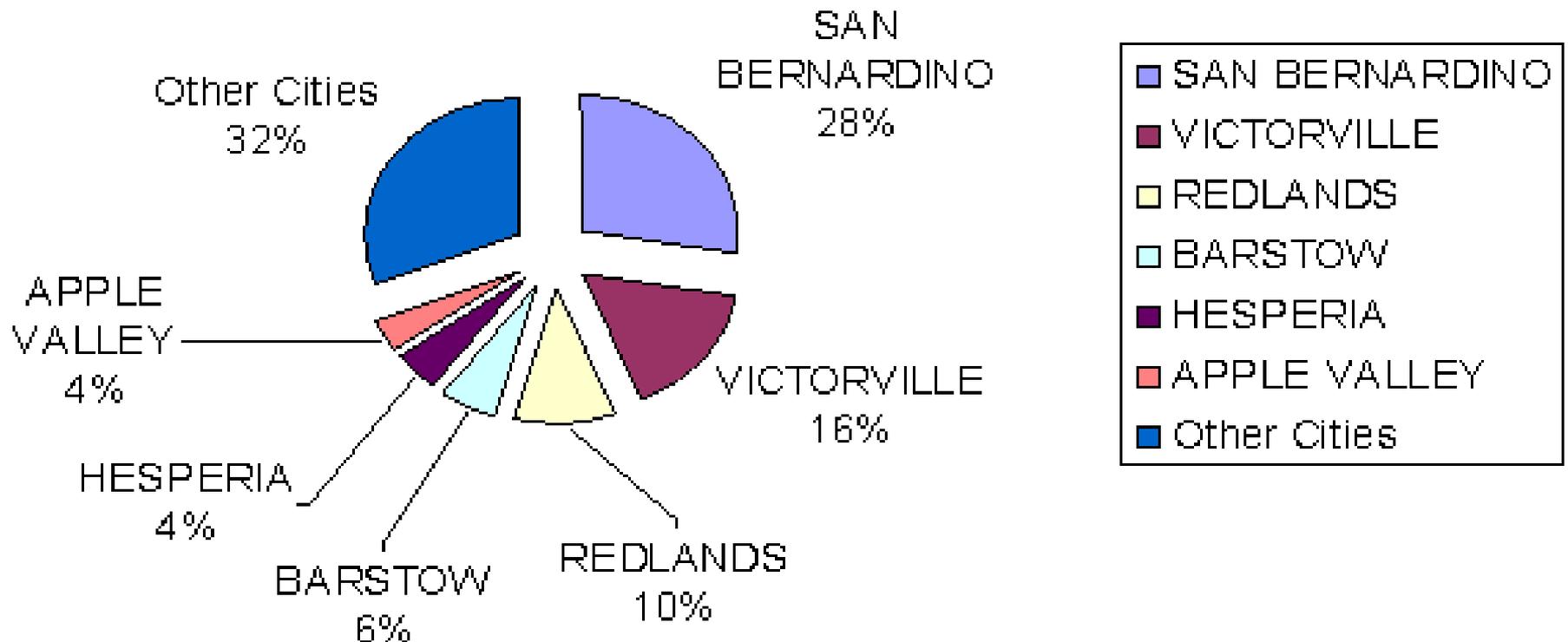
...and this

Prior Living Situation Prior to Program Entry

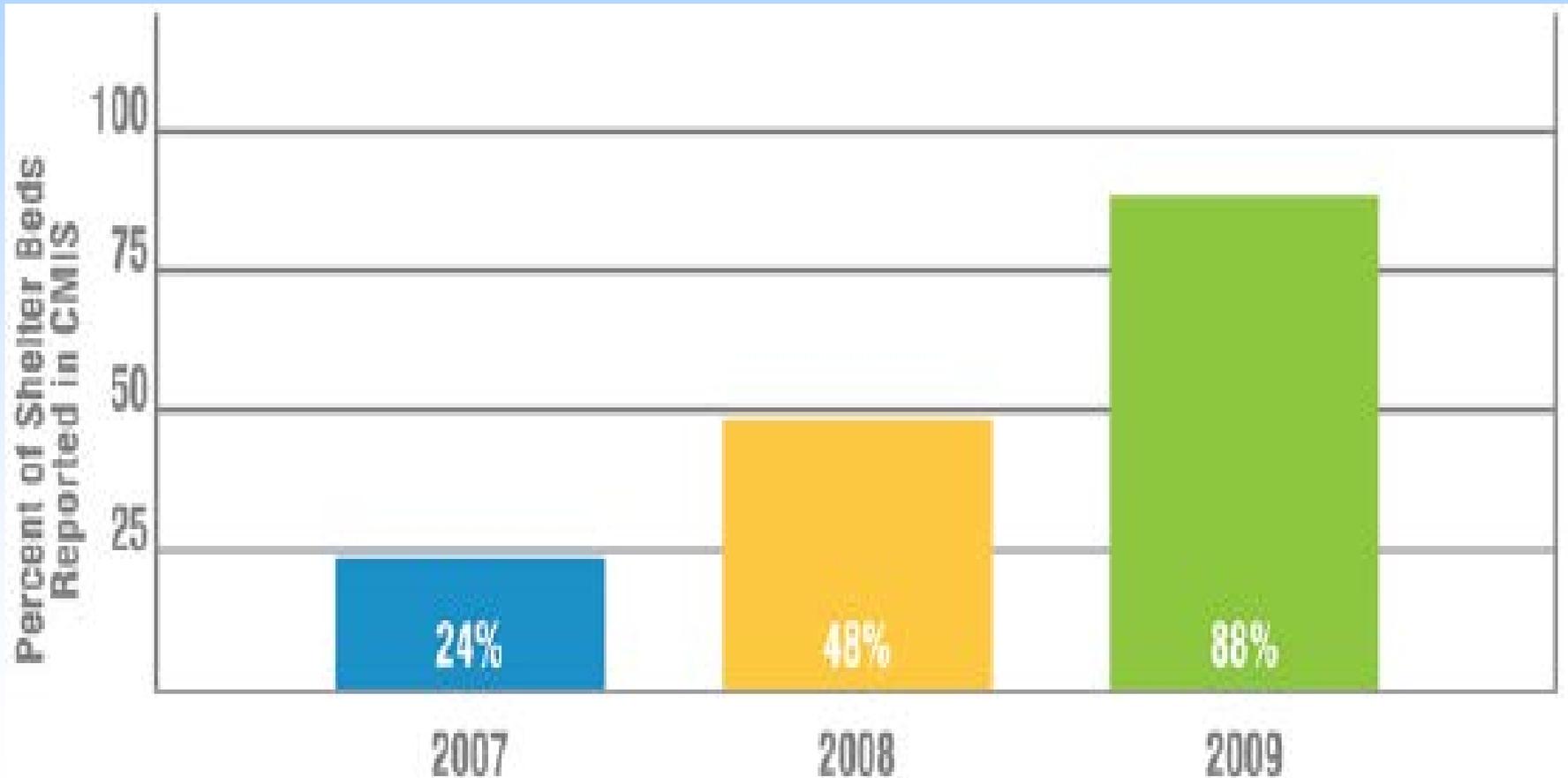


...or perhaps this

Homeless by City (San Bernardino + top 5 other CA cities)



How do you show improvement or increase?



How do you know your program process works?

	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	
Client enrolls into HPRP program	66	67	67	66	67	67	66	67	67	66	67	67	800
Client obtains hotel/motel vouchers	20	20	20	20	20	20	20	20	20	20	20	20	240
Client obtains security deposit (housing)	11	12	12	11	12	12	11	12	12	11	12	12	140
Client obtains Utility Deposit	5	6	6	5	6	6	5	6	6	5	6	6	68
Client obtains utility assistance	0	14	14	13	14	14	13	14	14	13	14	14	151
Client obtains rental assistance	0	20	20	20	20	20	20	20	20	20	20	20	220
Client actively participates in HPRP Program	0	0	54	53	54	54	53	54	54	53	54	54	537
Client is stably housed and/or has used maxi	0	0	0	0	0	37	36	37	37	36	37	37	257

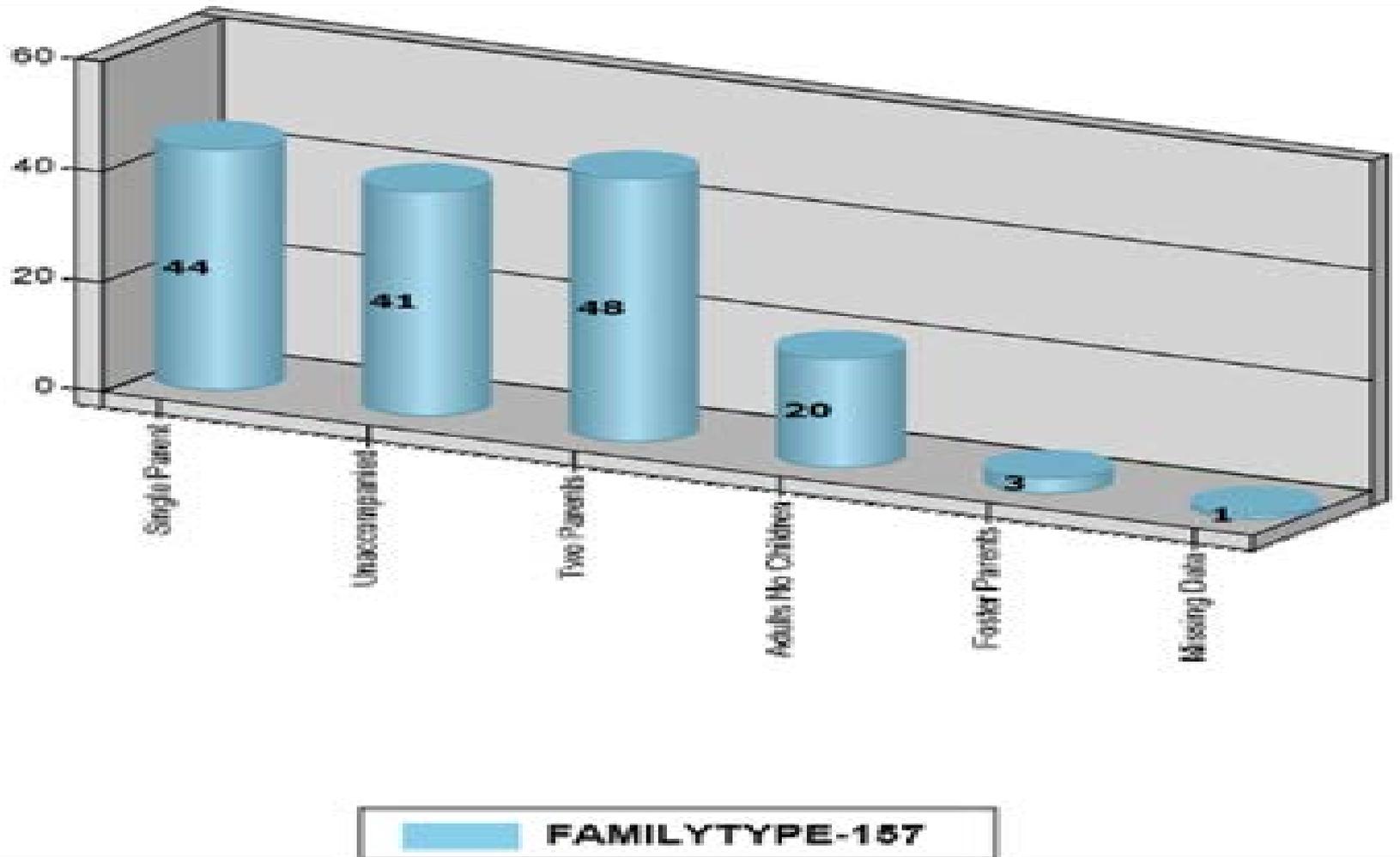
How do you track spending?

Program Component: Homelessness Prevention

Year : 2009

Expenses By Milestone					Funder Contribution		
No	Milestones	# of People Achieving	Total Cost	Cost Per Person	Contribution	Funding Source	% Contribution
PT	Enroll into HPRP	5	\$1,557.00	\$311.40	\$0.00	County of San Bernardino/CDH	0.00 %
PT	Maintain Housing	0	\$0.00	\$0.00	\$0.00	County of San Bernardino/CDH	0.00 %
PT	Secure Housing	3	\$1,789.00	\$596.33	\$0.00	County of San Bernardino/CDH	0.00 %
5	Client not complaint with program requirements - INACTIVE	0	\$0.00	\$0.00	\$0.00	County of San Bernardino/CDH	0.00 %

Can you report on family types?



How do you show client income increase?

<u>Distinct Client ID</u>	<u>Household Monthly Income at Entry</u>	<u>Monthly Income at Exit</u>
1000196	\$692	\$692
1008317	\$2,106	\$2,106
1008321	\$928	\$928
1008333	\$1,315	\$1,315
1014463	\$1,756	\$1,756
1018212	\$1,464	\$2,564
1018218	\$550	\$550
1050883	\$555	\$1,207
1068966	\$0	\$2,450
1076777	\$869	\$3,054

Sample of APR Reporting

Persons Served Worksheet

Collection of the Protected Personal Information (PPI) on this form is done with the knowledge or consent of the clients. The PPI is only used for the following purpose:

This worksheet is optional and is intended to help you collect information needed to complete the Annual Progress Report. Instructions and Codes follow.

NO	Name	Relationship	Entry Date	Exit Date	Leng Q12a	Leng Q12b	Non-Homeless (SRO)	DOB	Age 5b	Gender (M/F) 5c
1	Stuart Little		09/25/2009			21				
2	Get Smart		09/25/2009			21				
3	Bart Simpson		03/05/2009	07/30/2010	17					
4	Minne Pearl		03/31/2010	07/28/2010	4					

Are Client's Achieving Results?

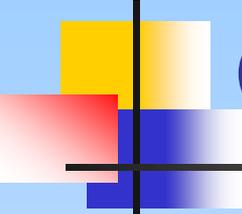
7. Results By Client Characteristic

County: All Counties

Program Component : Stepping Stones

Year : 2010

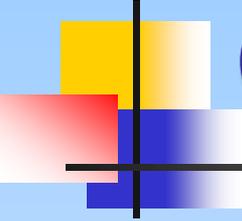
No	Milestones	Act		Home Status	Achieved Results	Achieved Results	Did Not Achieve
1	Enroll into program	9		Homeless	9	0	0
						0	0
2	Increase skills and income	9		Homeless	9	0	1
						0	1
3	Increase benefits	3		Homeless	3	0	0
						0	0
4	Achieve 3 personal goals	5		Homeless	5	0	1
						0	1
PT	Obtain permanent housing	5		Homeless	5	0	1
						0	1
6	Remain in permanent housing for 2 years	0			0	0	0
						0	0



State and Federal Reporting Capabilities

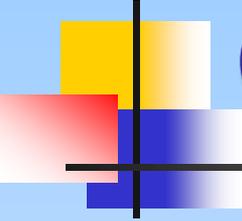
HMIS Participating Agencies can utilize HMIS data for completing:

- ✓ Annual Performance Reports (APR)
- ✓ Quarterly HPRP Reports
- ✓ Annual Homeless Assessment Reports
- ✓ Agency Specific Reports



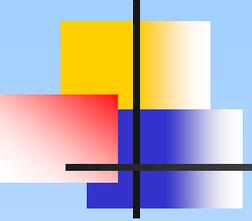
Common Barriers

<u>Barriers</u>	<u>Remedies</u>
* Lag in Data Entry	* Ensure time is set aside specifically for data entry
* Participants enrolled in multiple programs	* Track services provided
* Staff Resistance	* Be consistent, Keep it simple



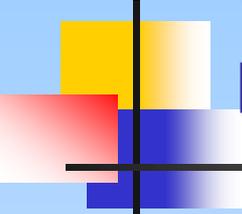
Common Barriers

<u>Barriers</u>	<u>Remedies</u>
✿ Not sure what data to collect	✿ Don't collect data just because, collect the data that will tell the real story
✿ Multiple funders with different reporting requirements	✿ Ensure contract info linked to correct services allows for funder reporting
✿ Not sure how to get started	✿ Lets cover that



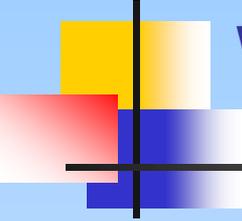
Who Should Participate?

- ALL recipients of HUD McKinney Vento Act program funds.
 - * Shelter Plus Care Beds (S+C)
 - * Section 8 Moderate Rehab Single Room Occupancy (SRO)
 - * Housing Opportunities for Persons with AIDS (HOPWA-grantees specifically targeting homeless required)
 - * Homeless Prevention Rapid Re-housing Program grantees and sub-grantees.



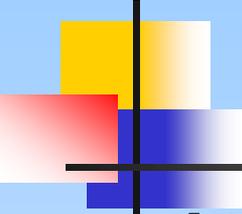
Emergency Solution Grant (ESG) New requirement – *HMIS Participation*

- On October 20th, HUD conducted live broadcast to review HMIS requirements and assist communities in initiating community planning for implementation of HMIS requirements for ESG recipients.
- The HEARTH Act requires recipients of Emergency Solutions Grant (ESG) Program funding to participate in applicable community-wide homeless management information system (HMIS).
- The FY2010 CoC NOFA encourages communities to begin considering the unique needs that the local HMIS may need to develop to accommodate projects funded through the ESG Program—emergency shelter, street outreach, and homeless prevention projects.



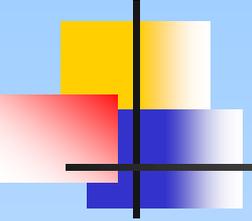
Who else should participate ?

- In addition to these HUD-funded programs, HUD encourages participation by all other programs within a Continuum of Care that serve homeless persons, especially other federally-funded programs.
- Non-Federally Funded Service Providers: For example programs operated by faith-based and/or community based organizations that do not get federal funds



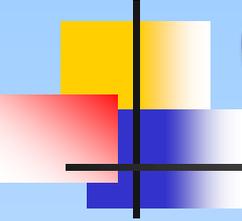
How do you get started?

1. Attend an orientation meeting.
2. Review the SBC CoC HMIS Policy and Procedures manual, HMIS Participating MOU agreement, Client Consent, End User Agreement forms with your board members.
3. Schedule an Outcomes and PC Set-Up meeting.
4. Attend User Trainings, Bed Module Training and Reports Trainings.
5. Begin entering data and running reports.



- Agencies are provided with:

- A Computer
- A Printer/Scanner
- Training (User, Bed Module, Reports)
- Technical Support (Monday – Friday 8-5)



Questions



Thank You