



“It’s Only Data!”

2017 HMIS Conference

March 23, 2017

ABC Recovery Center, 44359 Palm Street, Indio

CONFERENCE AGENDA		
Morning Session		Presenter
8:00 – 8:45	Registration/Breakfast	
8:45 a.m.	Opening and Welcome	<i>David Leahy / Angelina Coe</i>
9:00 – 9:30	Home Connect/CES	<i>Lynne Brockmeier, RUHS-Behavioral Health</i>
9:30 – 9:45	Housing First	<i>Kristii MacEwen, Path of Life</i>
9:45 – 10:30	Importance of HMIS	<i>Margaret McFaddin, HUD Consultant</i>
10:30 – 11:00	Riverside County HMIS Data	<i>Rowena Concepcion, DPSS Homeless Programs</i>
11:00 – 11:15	Other Federal Projects	<i>Karyn Young-Lowe, LSSC</i>
11:15 – 11:30	Where Are We Now	<i>Steve Falk, CoC Board of Governance Chair</i>
LUNCH BREAK 11:30 a.m. – 12:30 p.m.		
Afternoon Session		
12:30 – 12:50	Ice Breaker / Questions and Answers	
12:50 -1:00	HMIS Administrator’s Council	<i>Leonard Jarman, Chair, HMIS Council</i>
1:00 – 1:45	System Performance Measures	<i>Margaret McFaddin, HUD Consultant</i>
1:45 – 2:00	Emergency Solutions Grant	<i>Terri Bowen, EDA</i>
2:00 – 2:30	Data Entry Just Might Save a Life!	<i>Dr. Ronald A. Stewart, Consultant</i>



A photograph of a white building with a bell tower and palm trees at sunset. The building has a bell tower with a bell hanging inside. The sky is a mix of orange and yellow, suggesting a sunset. There are palm trees in the foreground and background. The word "HOMECONNECT" is written in large, white, bold letters across the middle of the image.

HOMECONNECT

**Coordinated Entry
for Riverside County
Through the HUD Continuum of Care**

Coordinated Entry

A Coordinated Entry system (CES) creates a cohesive and integrated housing crisis response system with our existing programs, bringing them together into a no-wrong-door system, utilizing a data retention process, diversion, prevention and common assessment tool to prioritize individuals , (whether sheltered or unsheltered), that allows our housing crisis response community to be effective in connecting households experiencing a housing crisis to the best resources for their household to provide sustainable homes.



COMMUNITY

Coordinated Entry

HMIS

Community Solutions

HUD

HOMELINK

CoC

Strategic Planning



25 Cities

ESG

COMMUNITY



take the *next* step

Achievements

Process

Data

Next Steps

Achievements

*Developed a CES process

- **Building the plane while we fly it!**

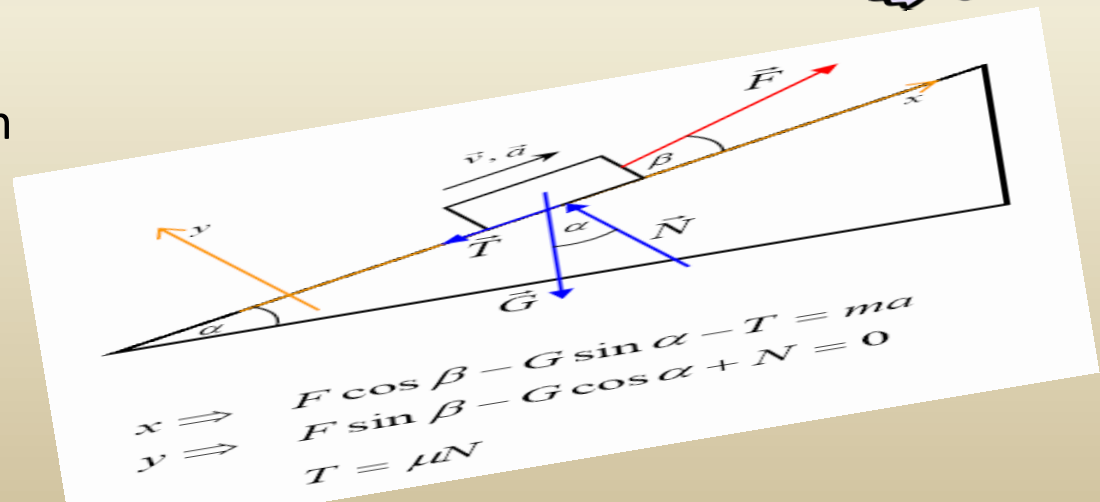
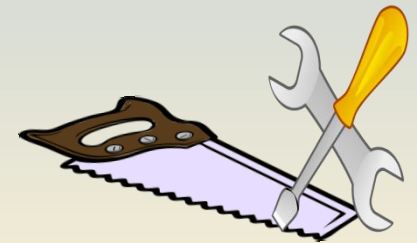
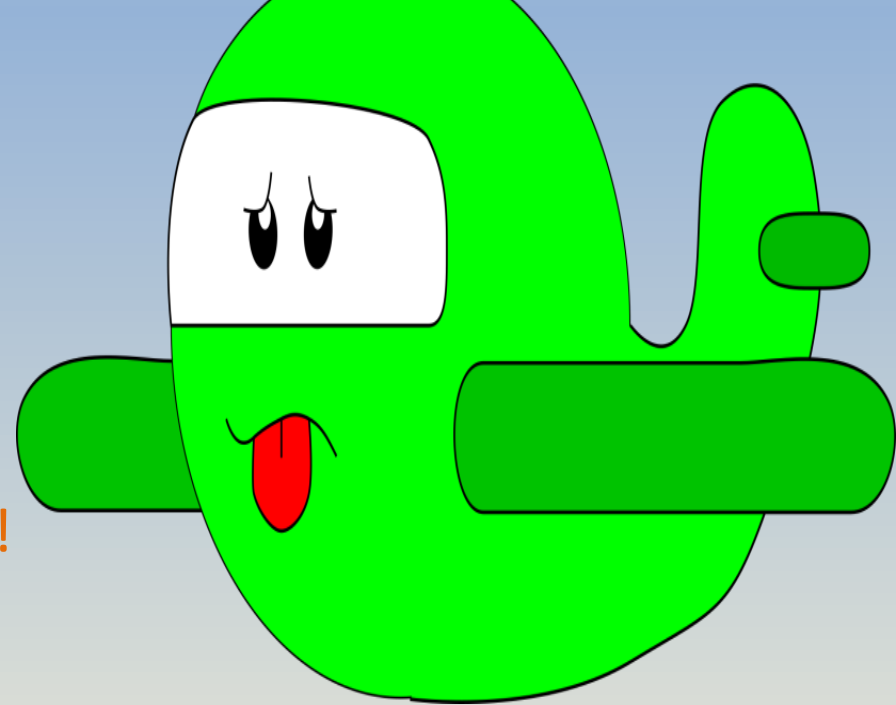
- Actively continuing to develop

- COC committee to support the efforts :

- CES Oversight Committee

- » work on the policies

- » supports of the system



Achievements

- Collaboration
- Case Conferencing



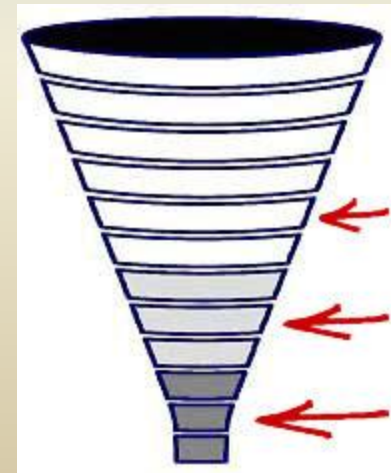
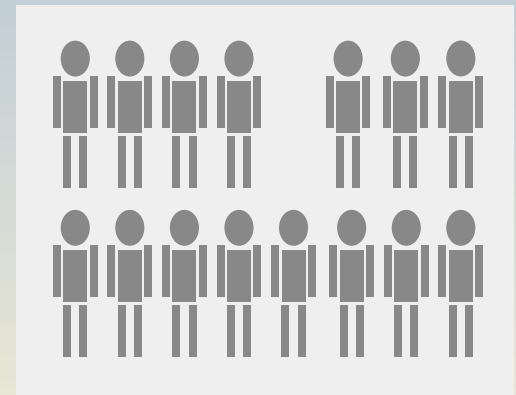
KEEP
CALM
AND
START
COLLABORATING



COLLABORATION

Achievements

- Developed an active list based on vulnerability and prioritizations



Top 20 for focus during the HomeConnect Meetings

Achievements

- Awarded a CES lead Agency
- HomeConnect



Achievement

- Veterans Zero

Functional Zero

Riverside City Zero

Riverside County Zero



Achievements



**First large community
in the Nation !**



November 2016

BOS Proclamation

Achievements

- **On 12/21/2016:**

On behalf of our federal partners, I am pleased to inform you that the Department of Housing and Urban Development, Department of Veterans Affairs, and United States Interagency Council on Homelessness have confirmed that the City of Riverside and Riverside County have effectively ended homelessness among Veterans. With a hard copy to follow, please find attached a letter officially communicating this good news.

We appreciate your commitment to building upon this success to end homelessness for everyone in your community. Thank you so much for your dedication to this work, and we look forward to hearing about your continued progress and to supporting your efforts in any way we can.

Congratulations – and thank you – again!

Sincerely,

Matthew

Matthew Doherty

Executive Director

United States Interagency Council on Homelessness

Key Points

Case Conferencing

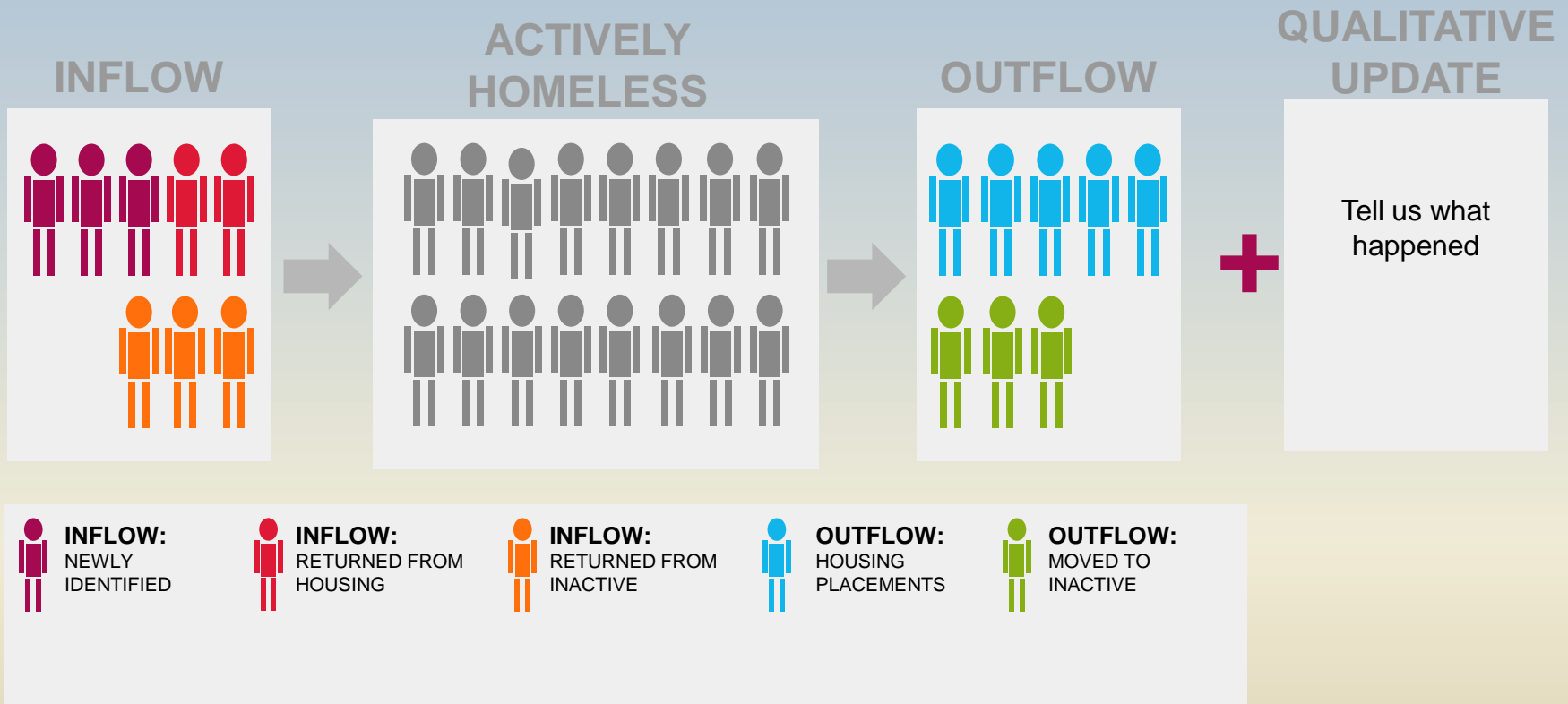
- Positive attitude
- Each case is different
- Trusting partners
- No such thing as fail
- Troubleshooting
 - Barriers
 - Patterns
 - Points of resistance
 - Points of acceptance
 - Using these to brain storm- ie if resistant to male, bring in a female worker, if resistant to county employee or VA employee bring in non-profit , serve their pet invoked trust in us



Achievement



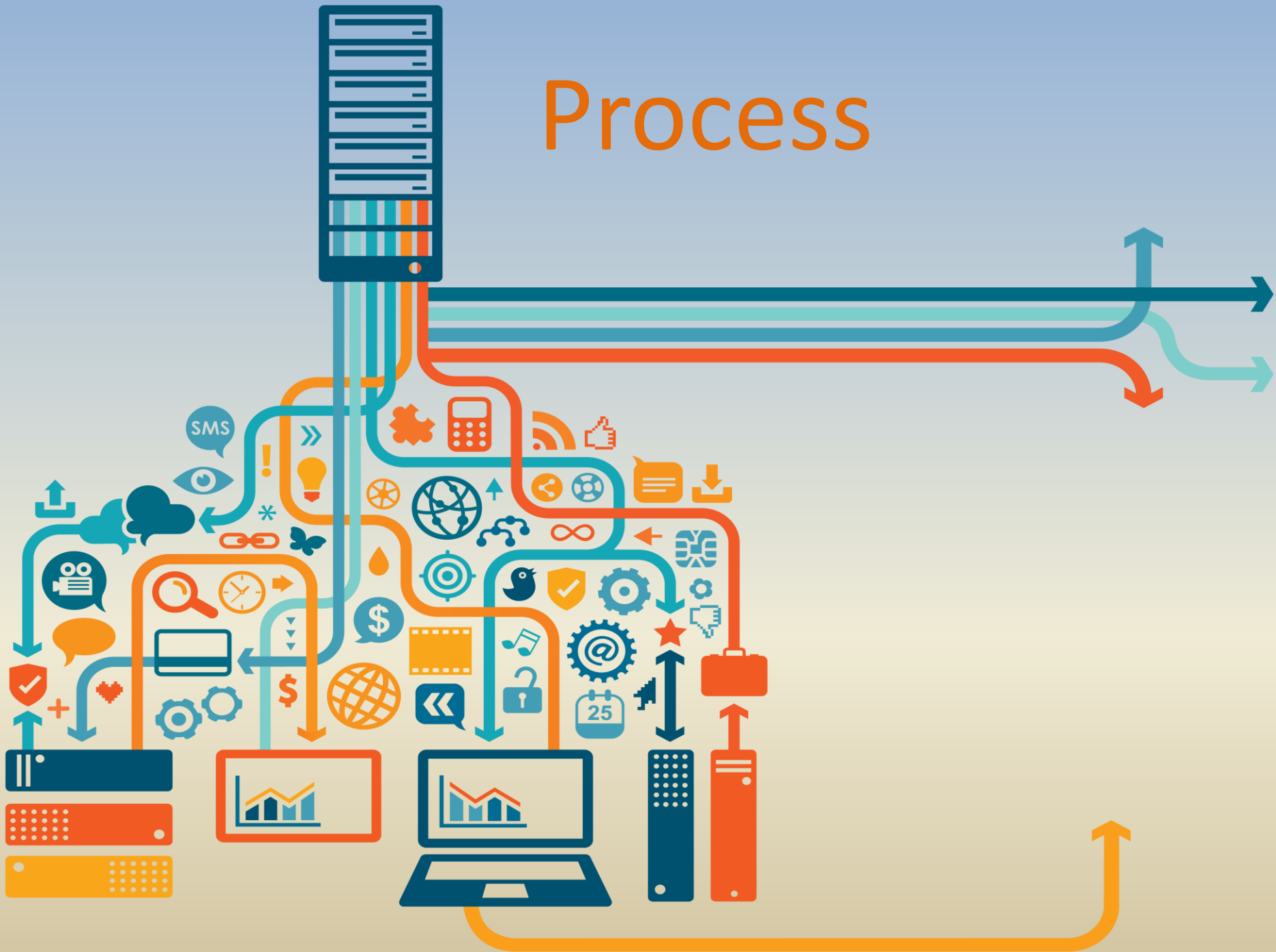
Collaborative Reporting



HomeConnect Navigation Review Council Members

- *Coachella Valley Rescue Mission*
- *Community Mission of Hope*
- *Housing Authority of Riv Co*
- *Jewish Family Service*
- *Lighthouse Social Service Center*
- *Path of Life*
- *Riv Co DPSS Homeless Program*
- *Riv Co Probation Dept*
- *Riv Co Sheriff HOT team*
- *Robert Presley Detention Center*
- *RUHS-Behavioral Health*
- *Street Life Project*
- *City of Riverside Outreach*
- *Riv Co Public Health*
- *Temecula Pantry*
- *The Convergent Center*
- *The Path of Life*
- *US Vets*
- *Valley Restart Shelter*
- *Veterans Community Services*
- *VA*
- *Indio PD Quality of Life Team*
- *Palm Springs Quality of Life Team*

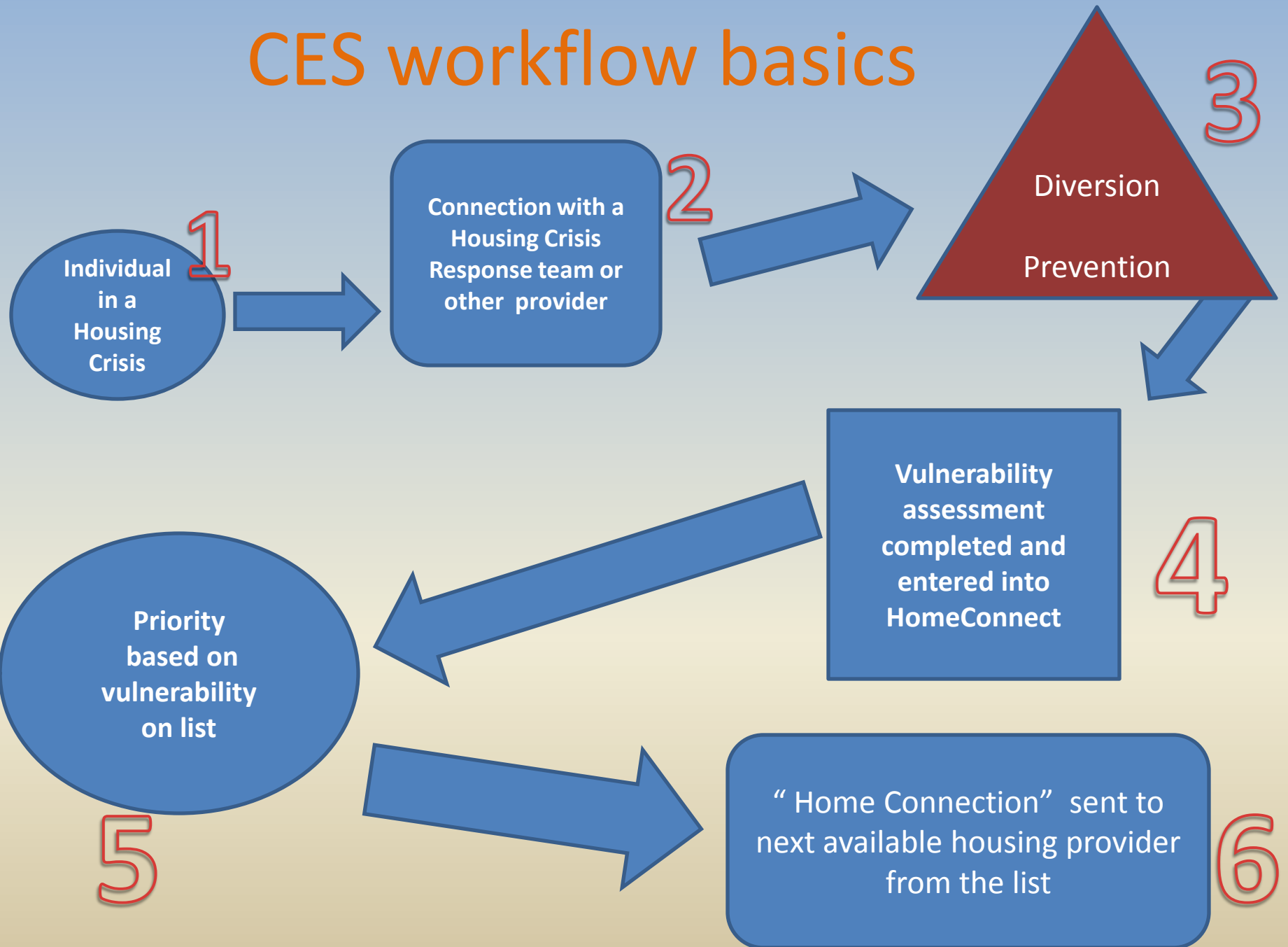
Process



Key Components of “HomeConnect”

- Common Vulnerability Assessment
- Community wide Database
- “By Name “ Active List
- Prioritization based for vulnerability
- Housing referrals based on Prioritization
- Community Providers Navigation Council

CES workflow basics



CES considerations

Data Integrity

Scores

Diversion

Prevention




Community Solutions

- Data reporting around the federal objectives


Riverside County CoC

How to measure functional zero?

*At any point in time,
the number of veterans or chronically homeless individuals experiencing
sheltered and unsheltered homelessness in a community
will be no greater than that community's average monthly housing
placement rate for veterans or chronically homeless individuals, respectively.*



A real-time, constantly updated by-name list of everyone experiencing homelessness in your community (how many veterans are on this list?)



Comprehensive, de-duplicated count of all individuals who have been housed in the CoC, including in HOMES, HMIS, Excel spreadsheets, etc.

Riverside County CoC

By-Name List as of 1/11: 22 veterans

name	score	SPDAT date	date housed	CH	Months Homeless	gender	age	long term engagement- refused mutiple offers
A179	7	6/3/2016		Yes	36	Male		XX
A211	12	9/16/2016		No	0	Male		X
A218	14	9/28/2016		yes	42	Male		X
A229	14	10/21/2016		Yes	144	Male	53	X
A230	10	10/26/2016		Yes	22	Male		X
A232	5	11/15/2016		No	2	Female		
A233	11	11/16/2016		Yes	36	Male		
A234	3	11/16/2016		Yes	36	Male		
A235	11	11/28/2016		Yes	72	Male		X
A236	10	11/30/2016		yes	48	Male		
A238	13	12/5/2016		yes	24	Male		
A239	12	12/5/2016		yes	360	Male		X
A240	12	12/5/2016		Yes	156	Male		
A241	12	12/5/2016		Yes	24	Male		X
A244	11	12/7/2016		no	4	Male		
A245	8	12/8/2016		no	24	Male		
A246	7	12/8/2016		yes	84	Male		
A247	9	12/15/2016		yes	24	Male		X
A248	5	12/15/2016		No	3	Male		
A249	9	12/19/2016		Yes	1	Male		
A250	5	12/19/2016		Yes	11	Male		

Riverside County CoC

By-Name List Details (as of 1/11/2017)

- # of actively homeless veterans: 22
- # of chronic veterans: 16
- # of unsheltered veterans: 5
- # of sheltered veterans: 17 (10 GPD, 7 Emergency Shelter/Bridge)

What are some of the BNL's outstanding qualities?

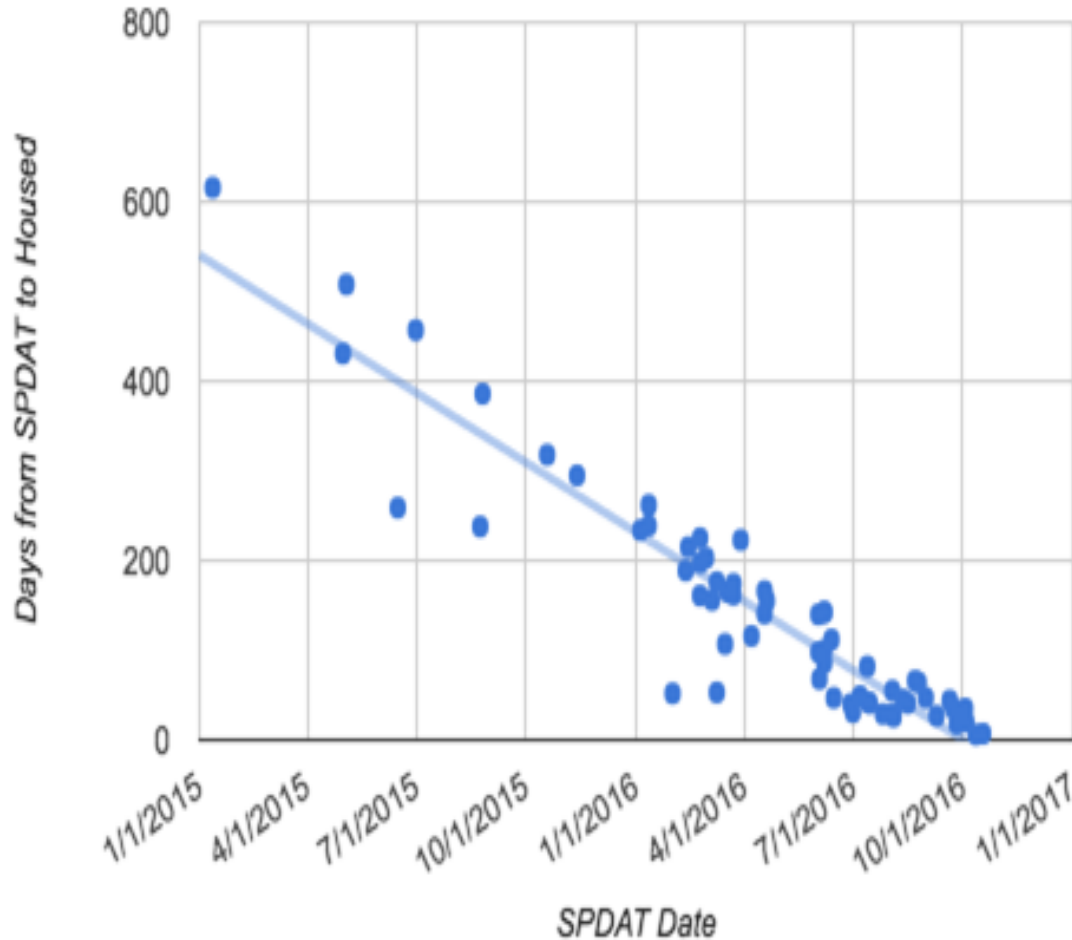
- Clear leadership
- Real-time data with ability to review on a daily basis
- Weekly Navigation Council Review process
- Robust and coordinated outreach

Is there anything that can still be improved?

- Transition to HMIS
- Continued engagement to ensure sustainability

Riverside County CoC

Time from Identification (Assessment) to Housing



Riverside County CoC

By-Name List Inflow

Month	Newly Identified	Returned to Active
July 2016	6	
August 2016	9	
September 2016	3	1
October 2016	8	
November 2016	8	
December 2016	13	4

6-month average inflow: 8.7 veterans

Riverside County CoC

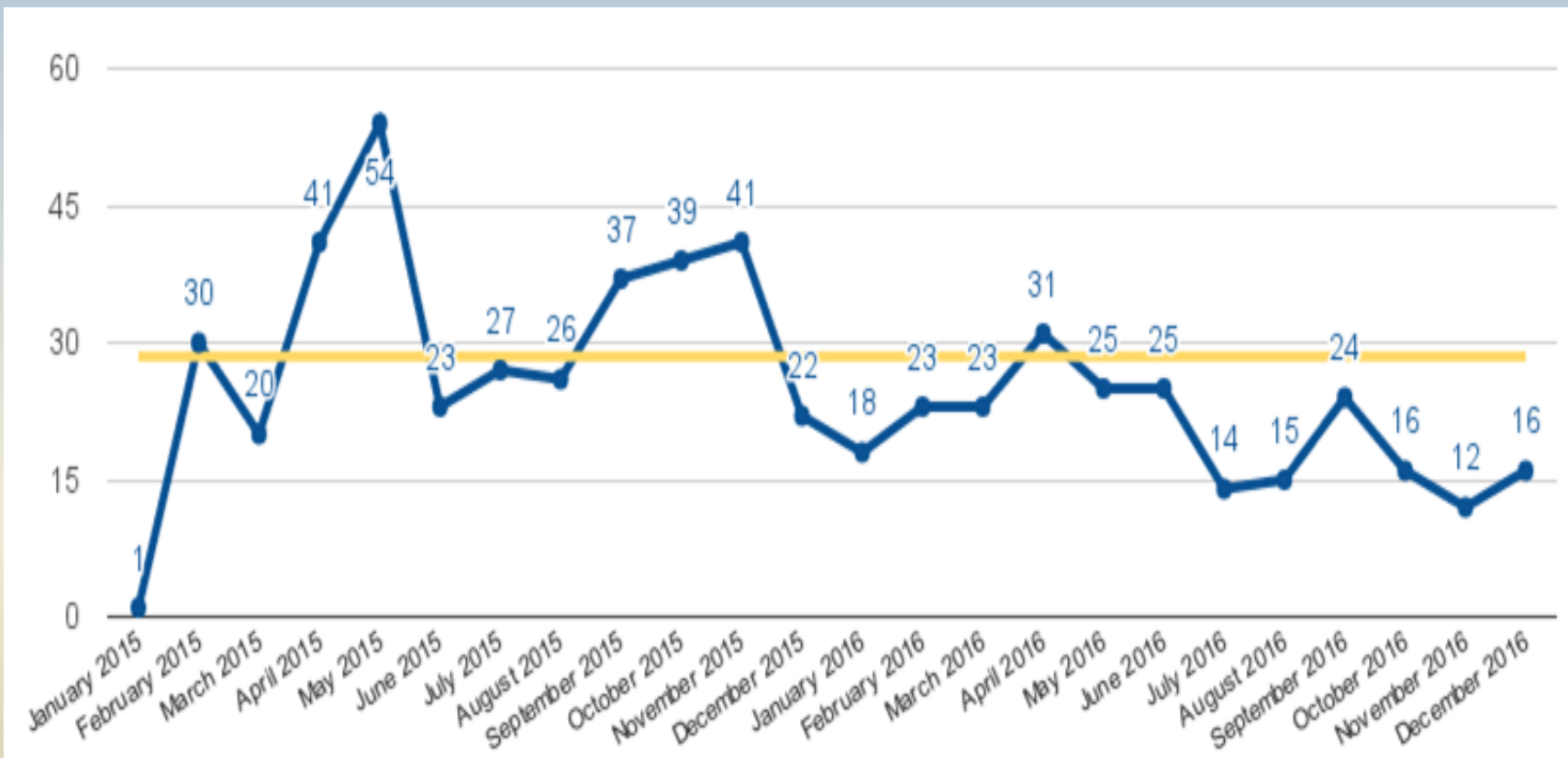
Placement Rates

Month	Placements
July 2016	14
August 2016	15
September 2016	24
October 2016	16
November 2016	12
December 2016	16

6-month average placements: 16.2 veterans

Riverside County CoC

Housing Placement Performance Over Time

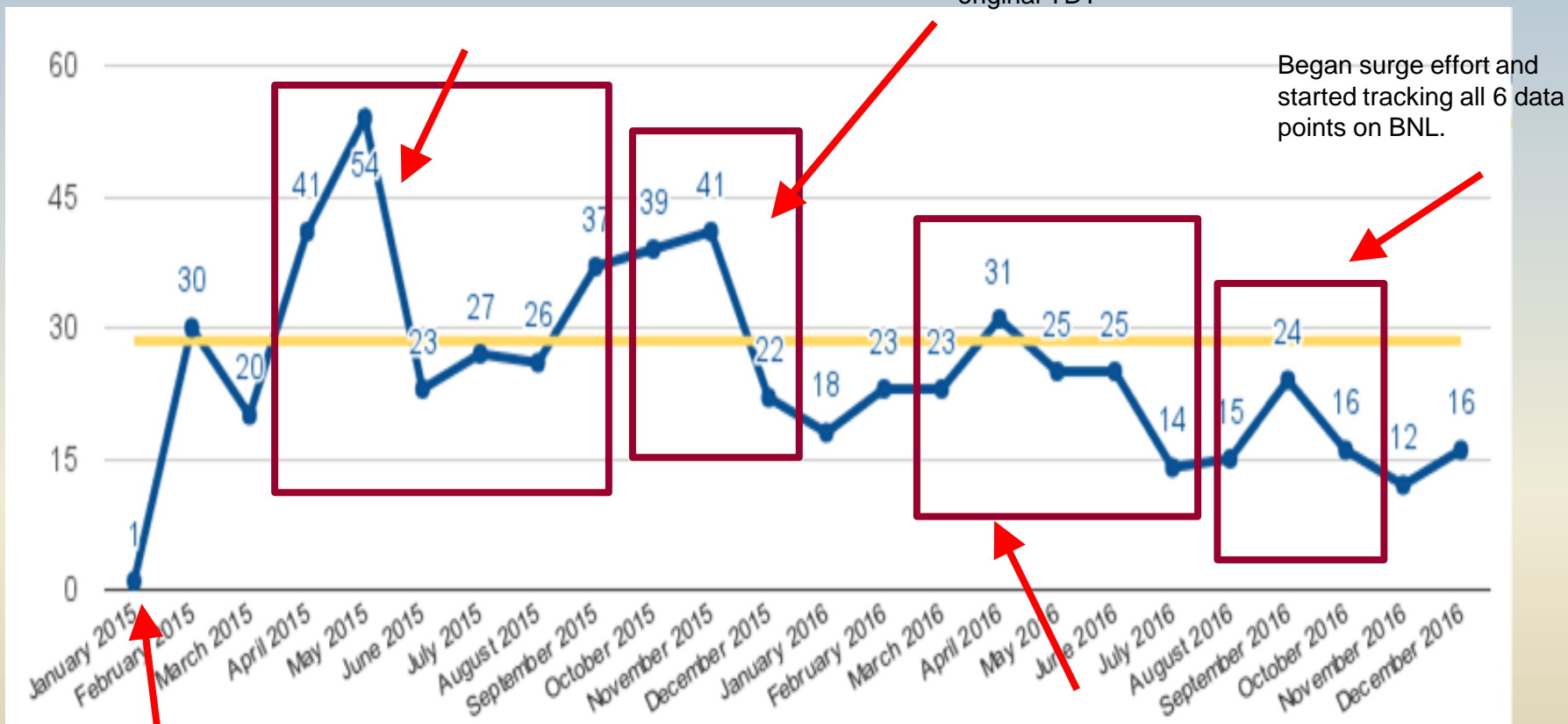


Riverside County CoC

Annotations

Data Guru received missed placements from previous months but did not have month by month breakdown.

Providers were surging to meet original TDT



Began surge effort and started tracking all 6 data points on BNL.

Data Guru was having trouble getting placements.

New Leadership over Veteran work, extensive data cleanup, providers began weekly meetings focused on BNL, Housing Placements reported using the BNL -- system stabilizes.

Riverside County CoC

Reaching Functional Zero

Month	Monthly Housing Placements	Moved to Inactive List	Inflow (Newly Identified + Returned to Active)	# Veterans Remaining	6-Month Average Placement Rate
July 2016	-14	-0	+6	73	23.5
August 2016	-15	-0	+9	67	22.2
September 2016	-24	-0	+4	47	22.3
October 2016	-16	-11	+8	28	22*
November 2016	-12	-1	+8	23	22*
December 2016	-16	-9	+17	15	22*

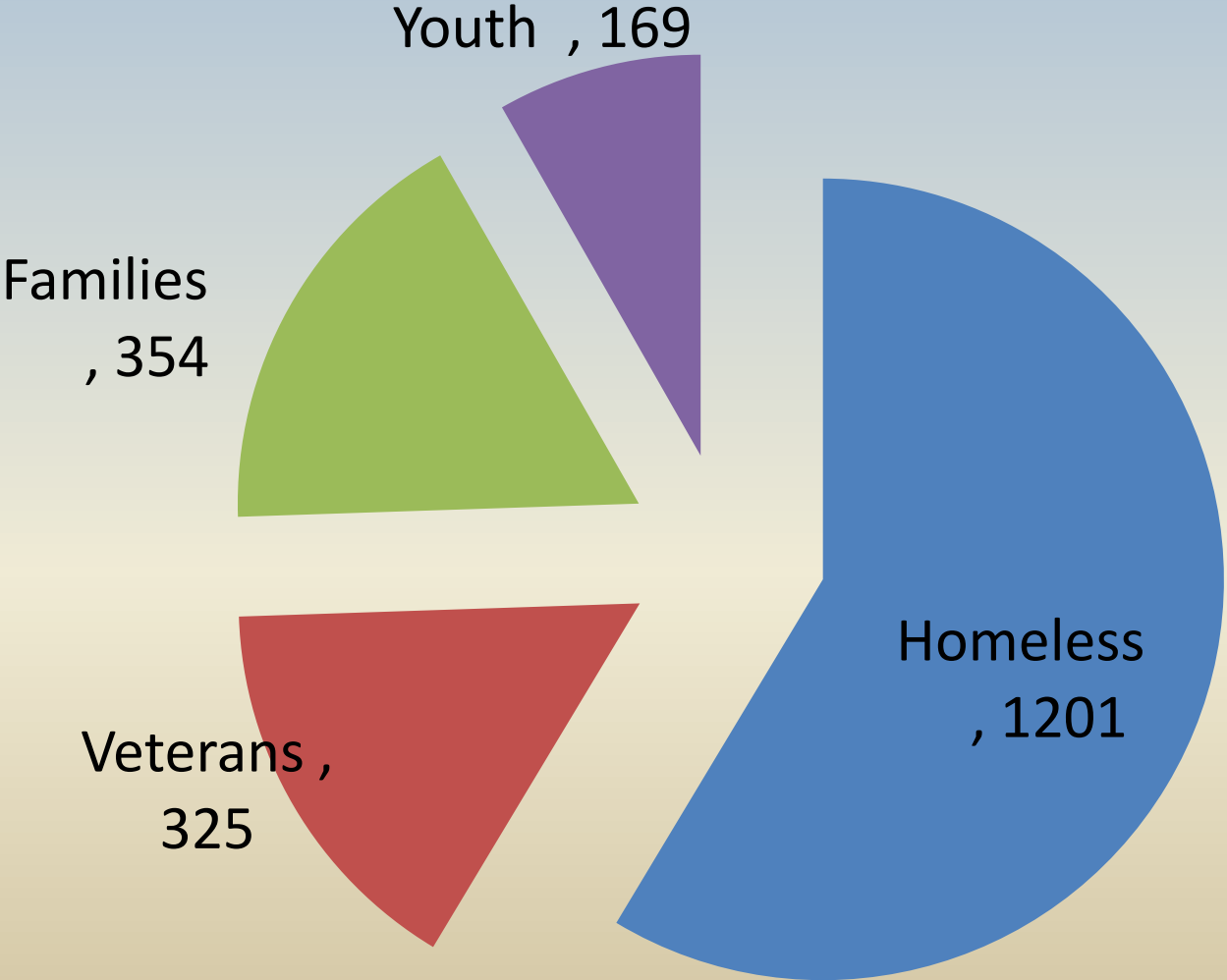
Riverside County CoC

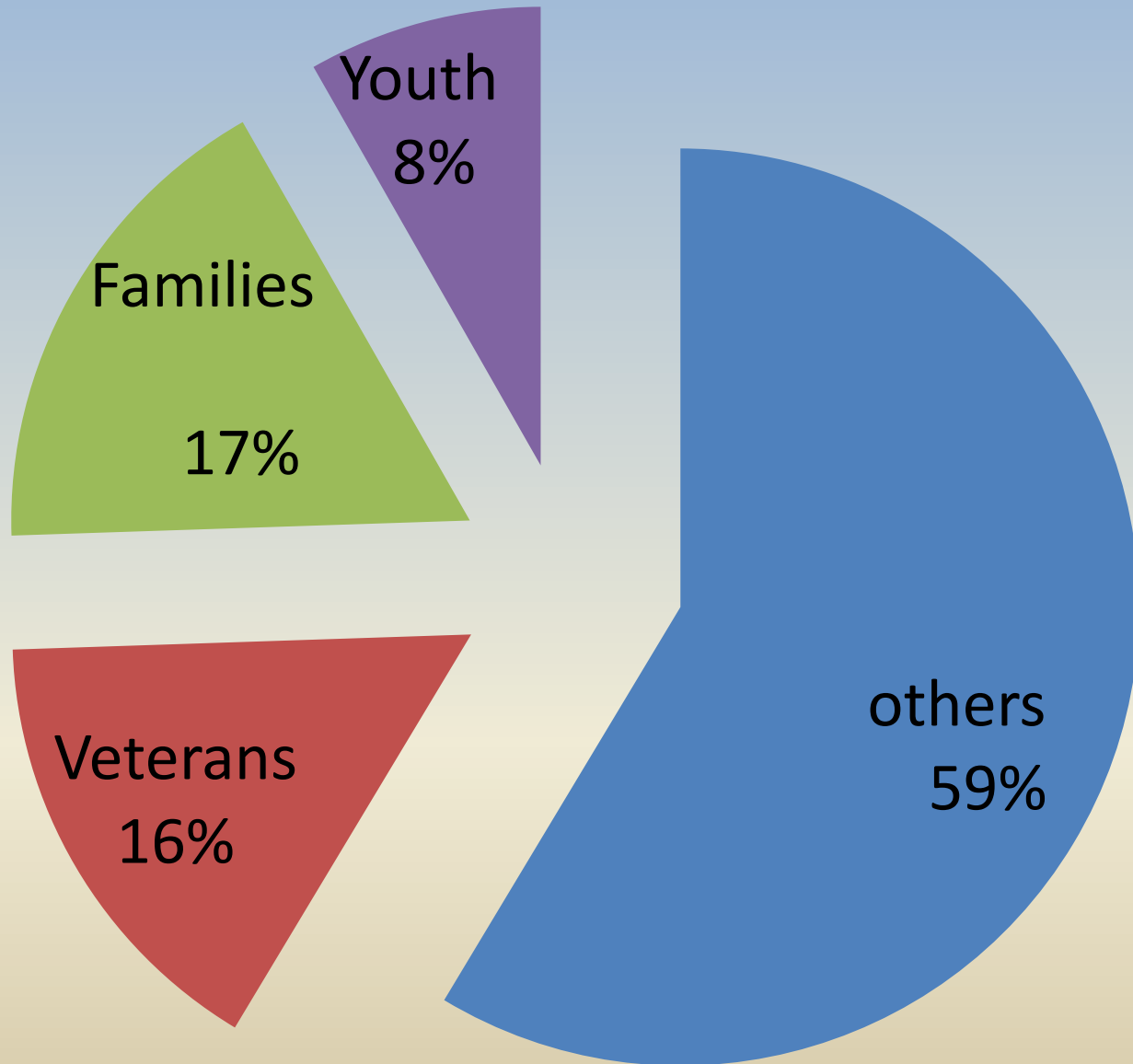
Sustaining Functional Zero



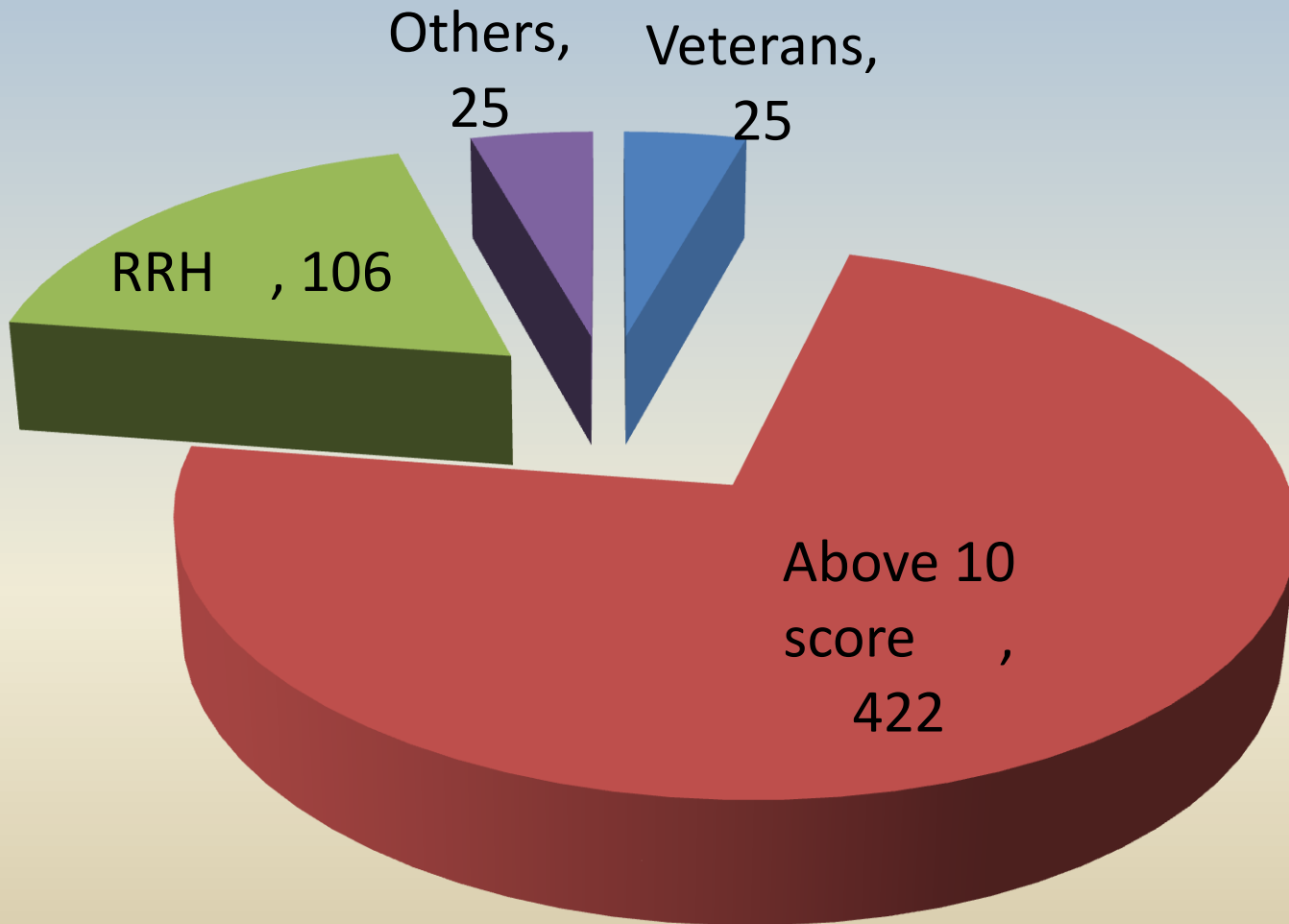
HomeConnect Data Reporting

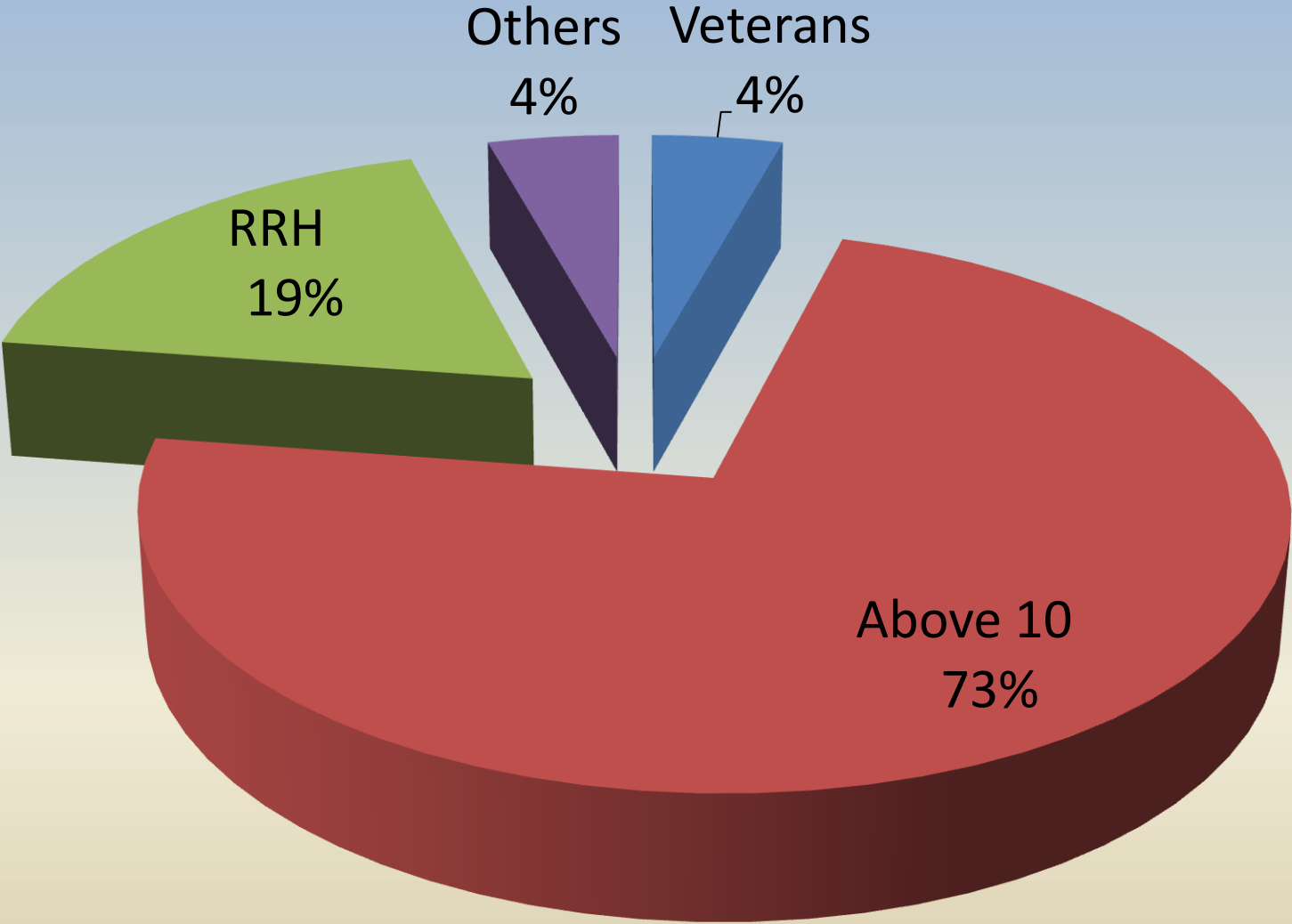
VI-SPDATs entered into system since Jan 2016

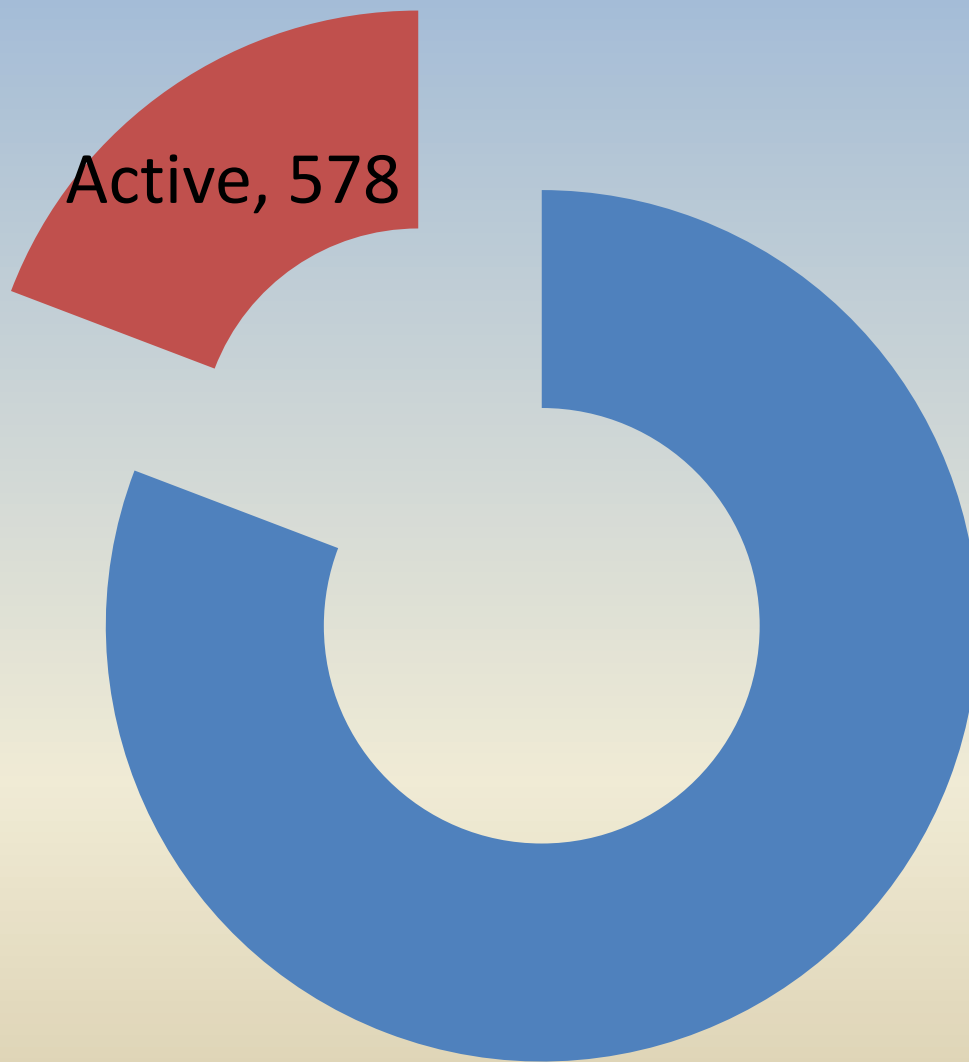


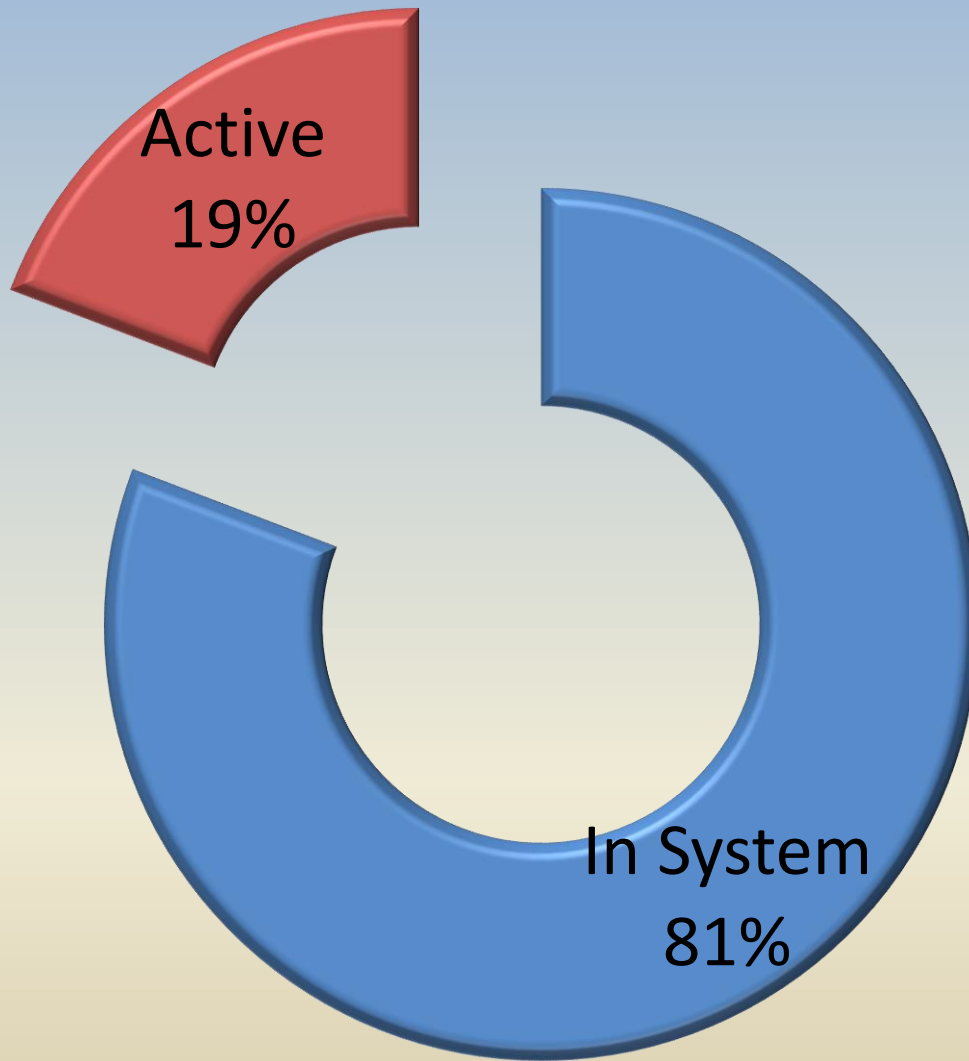


Currently Active (unhoused) in the System

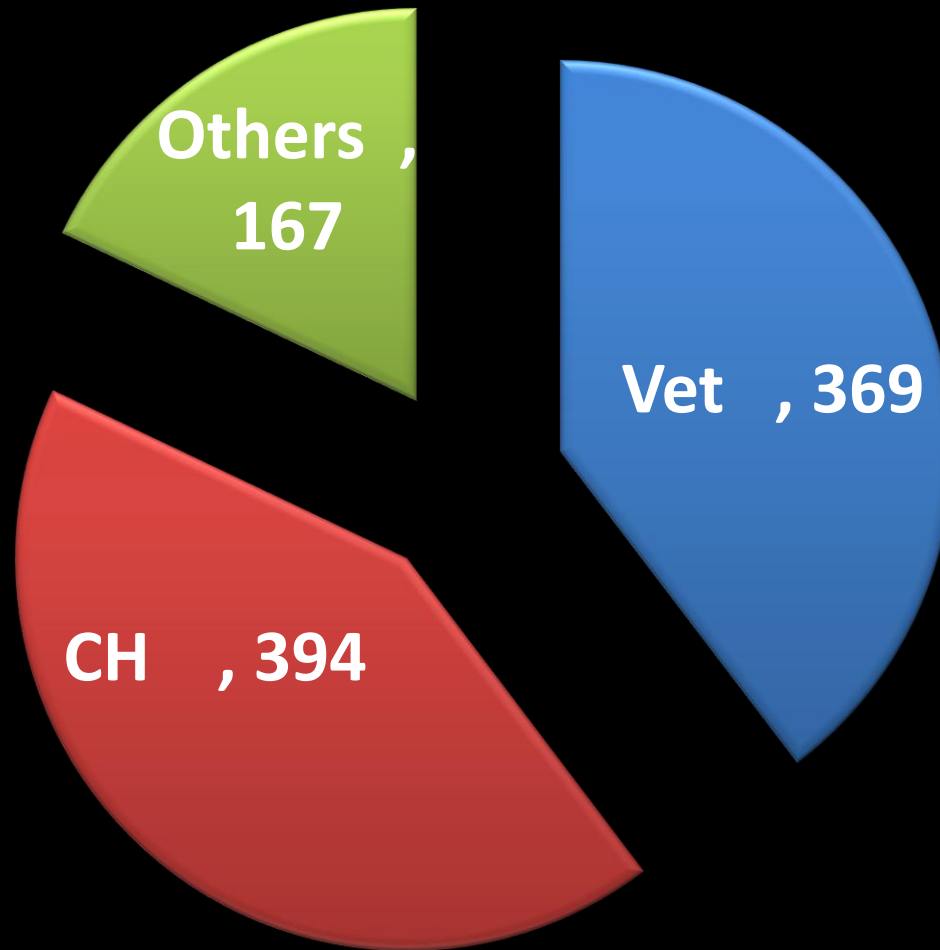


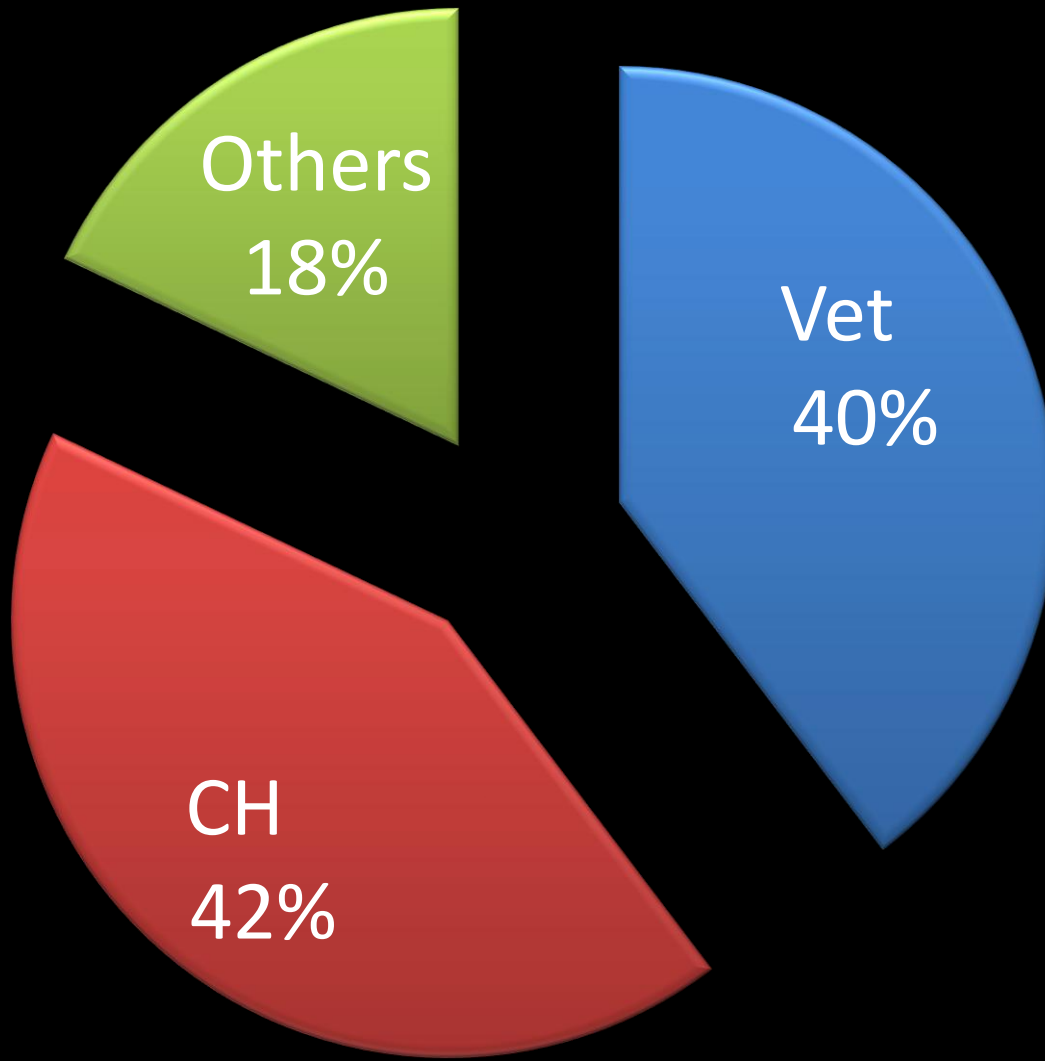






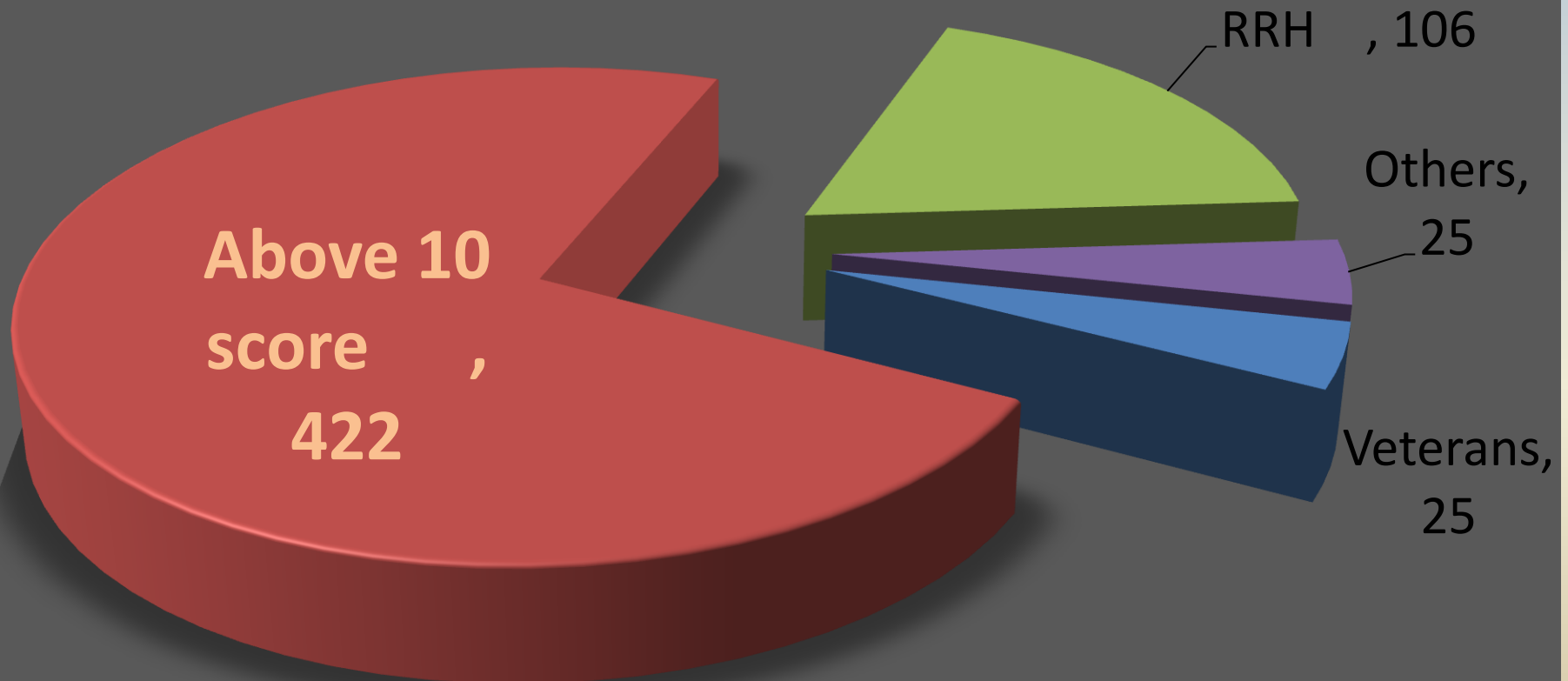
Housed - documented in the system Last 12 months





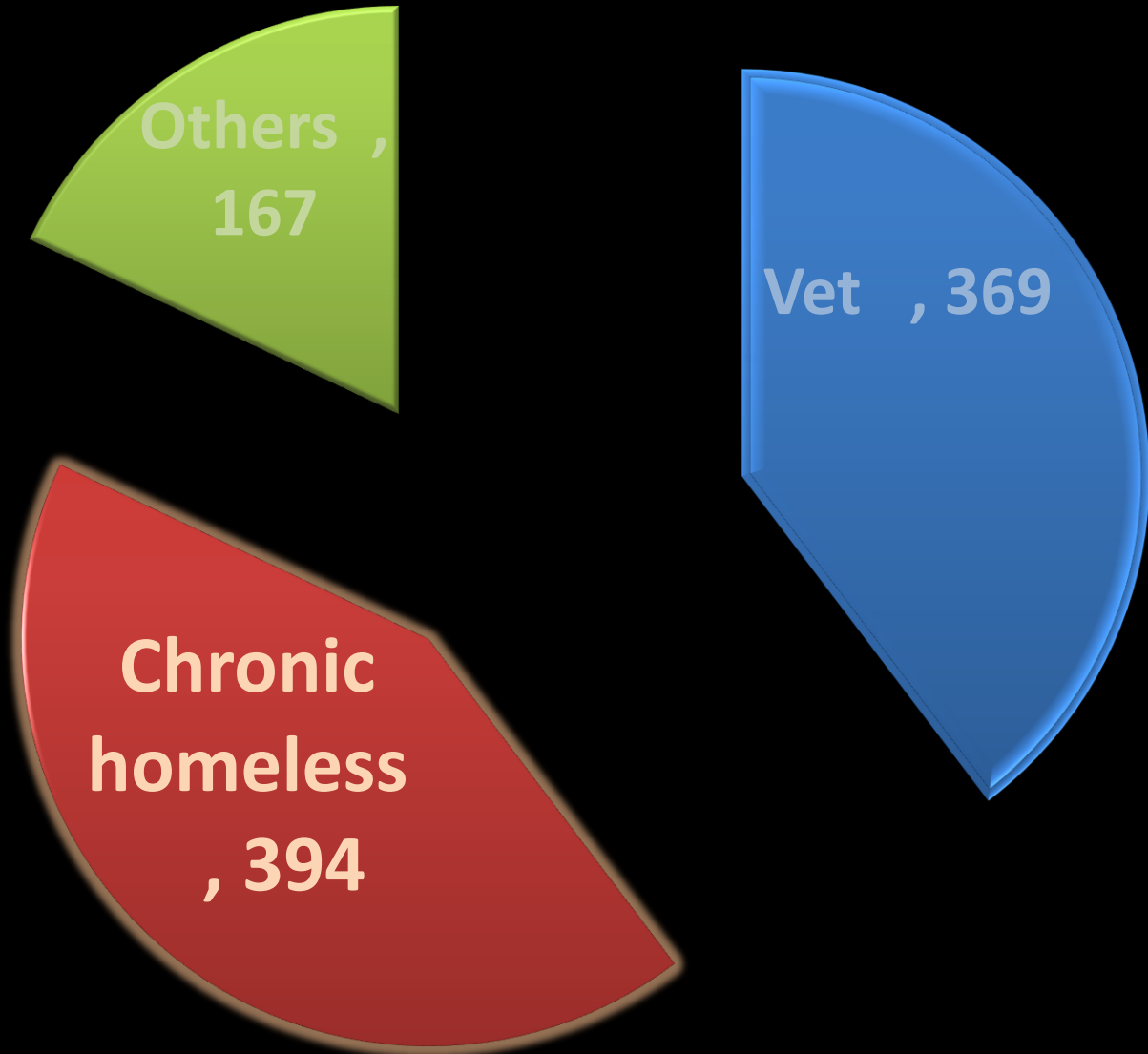
Did you catch that ????

Currently (unhoused) Active in the System
with apprx. 30 already with Home Connections

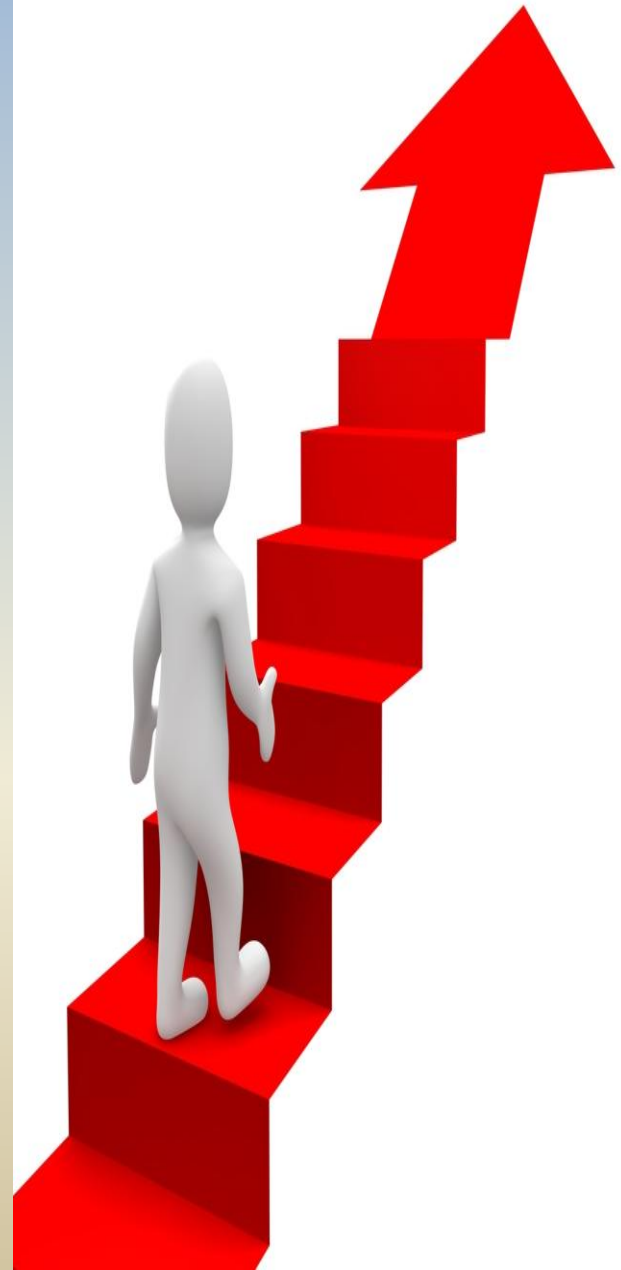


Intriguing.... ???

Housed - documented in the system last 12 months







A man with a stressed expression, his hand on his forehead, is surrounded by large stacks of papers. The background is filled with these stacks, creating a sense of being overwhelmed by information.

➤ **HUD released new guidelines**

➤ **Jan 2018**

➤ **Policy**

➤ **Procedures**



➤ **Move to new data system – HMIS**

➤ **System Improvements**

➤ **Setting Goals**

When you create
a
Excelling
process...

You are never
done



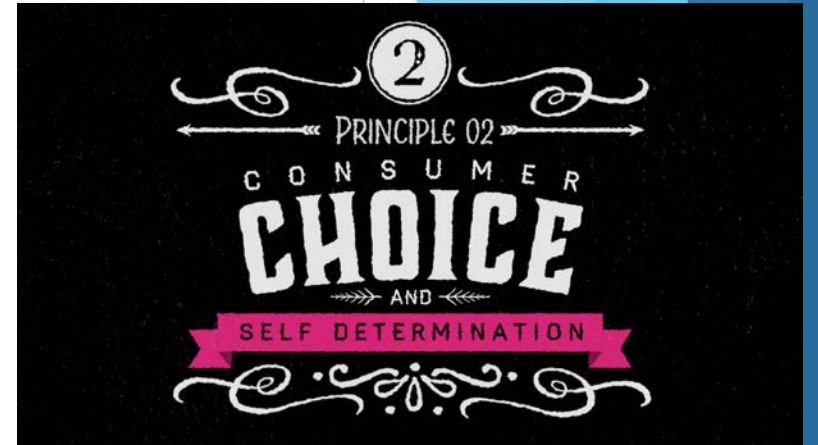
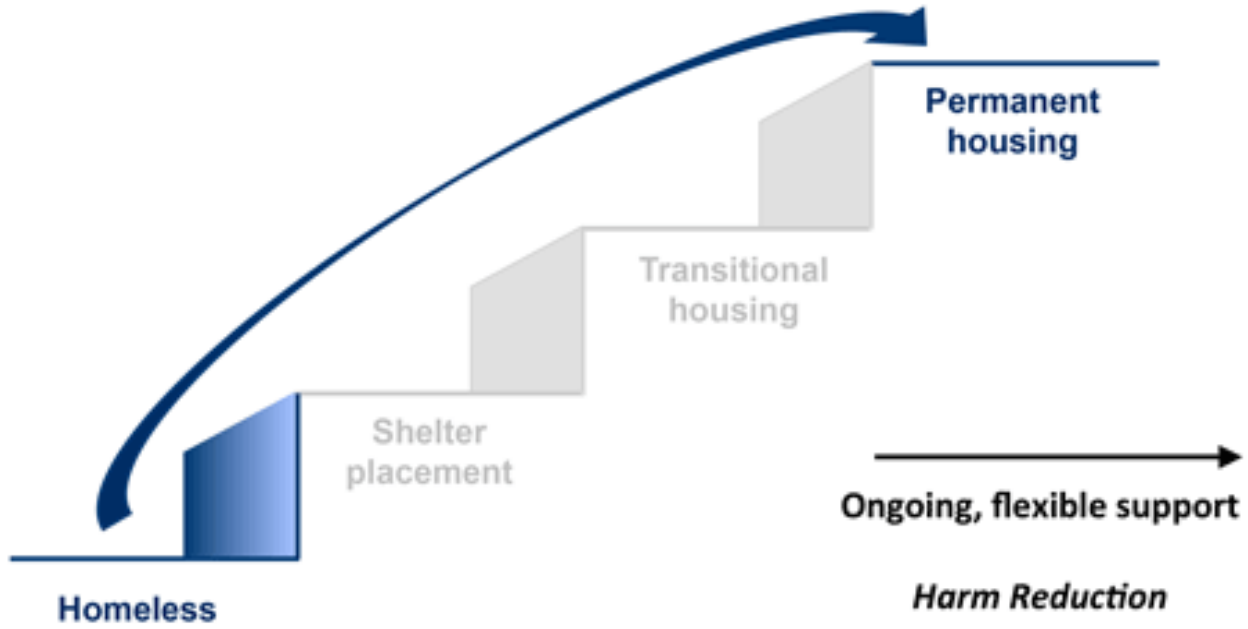
take the *next* step

Questions ?

Housing First

HMIS Conference 3.23.17

Housing First approach



STRUCTURAL
VIOLENCE

- **Structural Violence:** is action built into the structures of society which show up as unequal power and unequal life chances; the unequal distribution of resources and the *unequal distribution of power to decide over the distribution of resources*

NON-COMPLIANCE

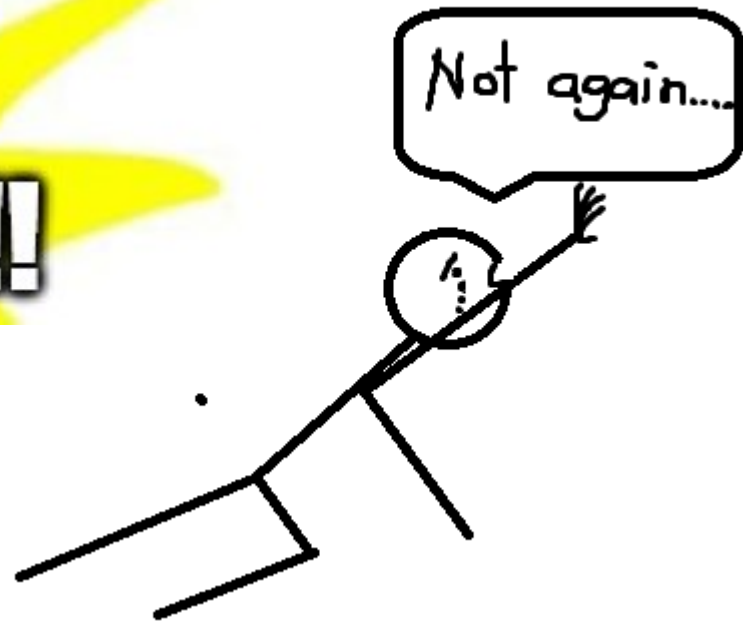
EXIT

**DRUG
TEST**

**THAT MOMENT WHEN YOU FIND OUT
THAT THE PERSON THAT YOU HATE**



imgflip.com





POWER



**CALLING ALL
SUPERHEROES!**

Housing First is the crazy belief that every person is capable of living in a home of their own.

Housing First means that they do not have to earn it - and that they are inherently worthy.

We must hold the hope.



“All I have and
all I am are the
same thing...
Nothing!”

How would you have to change if you could never Exit or “Fire” a client?



Housing First

Last updated on January 18, 2017

Housing First is a proven approach in which people experiencing homelessness are offered permanent housing with few to no treatment preconditions, behavioral contingencies, or barriers. It is based on overwhelming evidence that all people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate levels of services. Study after study has shown that Housing First yields higher housing retention rates, reduces the use of crisis services and institutions, and improves people's health and social outcomes.

Housing First is an approach that can be adopted by housing programs, organizations, and across the housing crisis response system. The approach applies in both short-term interventions, like rapid re-housing, and long-term interventions, like supportive housing. For crisis services like emergency shelter and outreach, the Housing First approach means referring and helping people to obtain

Substance Abuse and Mental Health Services Administration

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Homelessness Programs and Resources

Programs and Services

Behavioral Health and Homelessness Resources

Housing First Supports Recovery

Continuing Education Courses

Case Management

Self-care for Providers

Housing and Shelter

Employment

Trauma

Social Inclusion

Youth

Grantee Spotlight Stories

Homelessness Events Calendar

Housing First Supports Recovery

Stable housing through Housing First programs can end chronic homelessness and lead to engagement with services that support recovery.

I have been inspired by the many stories of the people who I have encountered in the nearly 20 years of working in the field. However, there is one story in particular that has motivated me over the last several years. Prior to joining my current employer I was the lead for homelessness strategic planning for a Continuum of Care (CoC).

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HOUSING FIRST

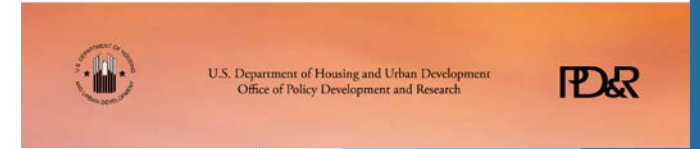
Ending Homelessness, Transforming Systems, and Changing Lives

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The Applicability of Housing First Models to Homeless Persons with Serious Mental Illness



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University of South Florida - College of Behavioral & Community Sciences - Mental Health Law & Policy

Department of Mental Health Law & Policy

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Housing First: A Review of the Literature

PUBLISHED: SEPTEMBER 01, 2010

ABSTRACT:

This technical report provides a review of the literature related to Housing First, a type of supported housing intervention that provides housing first to the most vulnerable homeless populations, followed by other support and services after a stable housing environment has been established. This review of the literature provides a discussion of the domains that distinguish the Housing First model from other service provision models: 1) housing choice and structure, 2) separation of housing and services, 3) service philosophy, 4) service array, and 5) program structure. In addition, this technical report provides a discussion of research related to the effectiveness of Housing First services, in general, and amongst Veterans in particular.

CITATION:

Ryneason, S., Barrett, B., Clark, C.(2010). *Housing First: A review of the literature*. Prepared for the National Center on Homelessness among Veterans. Tampa, Florida: Louis de la Parte Florida Mental Health Institute.

Housing First

A Review of the Literature

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HOUSING FIRST

Ending Homelessness, Transforming Systems, and Changing Lives

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National Alliance to END HOMELESSNESS

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Data Points: Housing First and Homeless Individuals with Mental Illness

written by Sam Batko

October 8, 2013

G f t in

This week is Mental Illness Awareness Week. With that in mind, I'm focusing today's research post on the impact that Housing First has on the individuals with severe mental illness—particularly the impact on their involvement with the criminal justice system. The study we're going to look at is a randomized control trial in Vancouver, Canada, that demonstrates benefits of Housing First among a homeless people with mental illness who were frequently involved with the justice system.

This trial found that:

- Housing First programs—particularly scattered site Housing First programs—reduced re-offending and reconviction among people with mental illness;
- The presence of a substance use disorder had no impact on re-offending or reconviction; and
- Both scattered site and congregate Housing First programs reduced re-offending regardless of the severity of the individuals' mental illness.

These findings suggest a number of important lessons. First, while both congregate and scattered site programs decrease re-offending, the scattered-site program may have been more effective in decreasing re-offending. This could be due to individuals joining an established community with a variety of household types. In contrast, the individuals assigned to the congregate setting in this study became members of a community that shared their immediate history of homelessness and offending.

Second, as the presence of a substance use disorder had no impact on re-offending or convictions, it appears that the harm reduction and lack of sobriety requirements that typify the Housing First approach likely contribute to public safety, in addition to the well-being of individuals in the program.

“ It is not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasms, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while **daring greatly** ”

— THEODORE ROOSEVELT

County of Riverside State of Homelessness

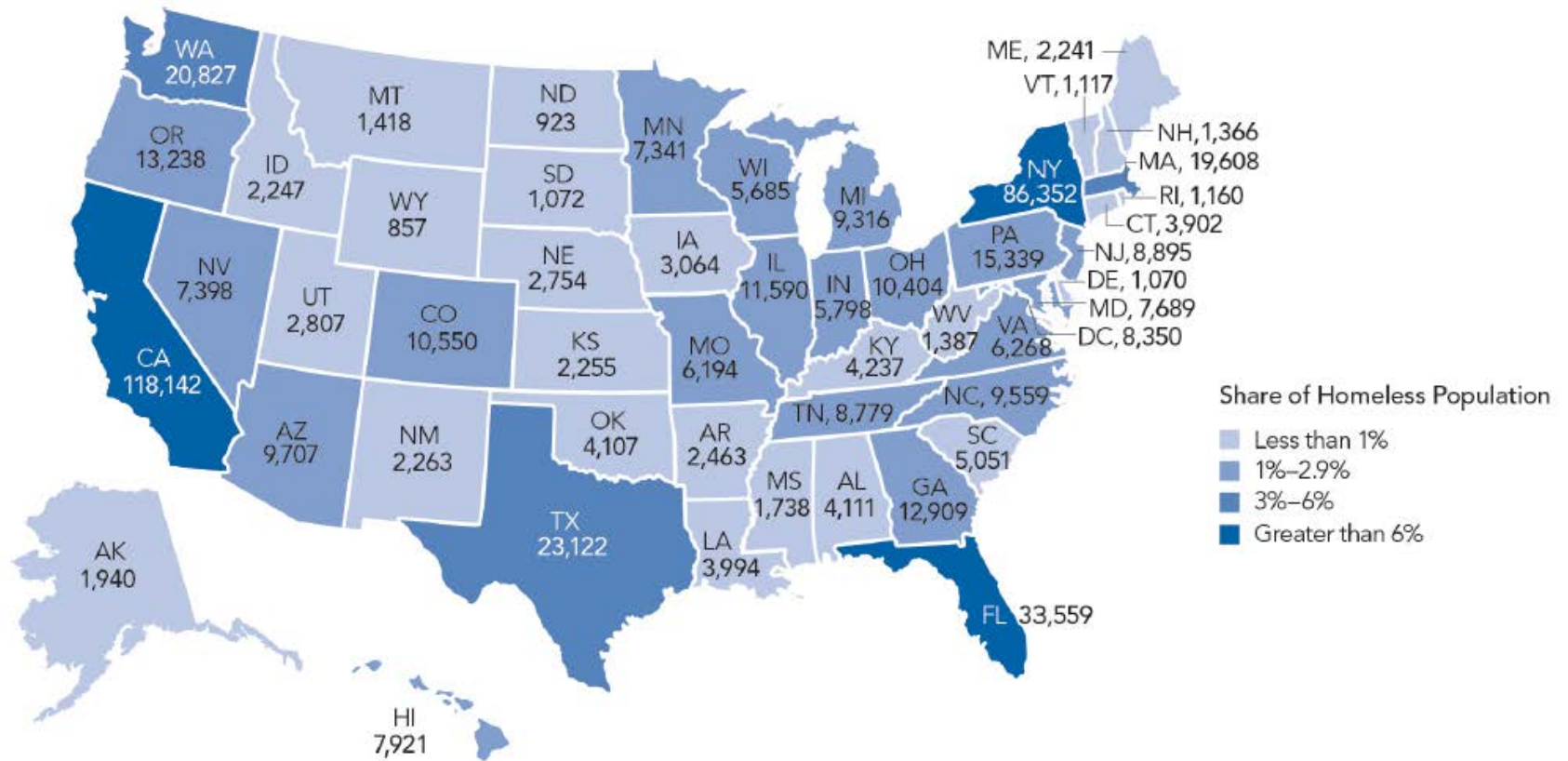
HMIS Conference
March 23, 2017



Data Sources

- ✓ 2016 AHAR – National and Local
- ✓ 2016 Point-in-Time Count
- ✓ 2016 Housing Inventory Count
- ✓ HMIS Data
 - RRH – 10/1/15 to 9/30/16
 - Prior Zip Codes

2016 Estimates of Homeless People By State



How Many are Homeless in the U.S.?

On a single night in January...

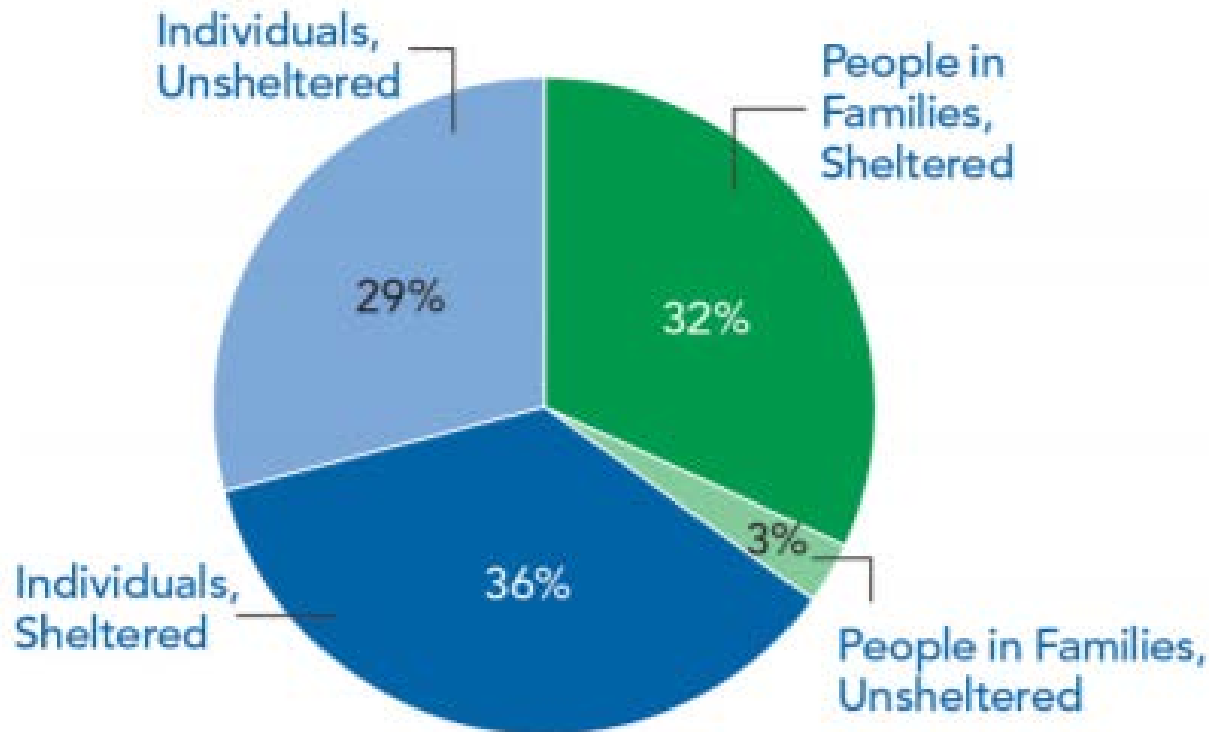
- 564,708 – Total # of people experiencing homelessness
 - 391,440 – Sheltered
 - 173,268 – Unsheltered
- 549,928 – Total # of people experiencing homelessness
 - 373,571 – Sheltered
 - 176,357 – Unsheltered

2015

2016



Percent of Homeless People By Household Type and Sheltered Status, 2016



On a Single Night in January 2016

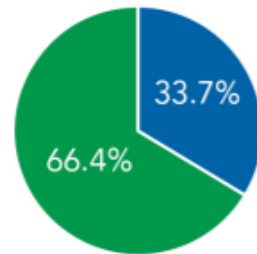
- Half of the homeless population in the US was in five states:
 - ✓ California – 22% or 118,142
 - ✓ New York – 16% or 86,352
 - ✓ Florida – 6% or 33,559
 - ✓ Texas – 4% or 23,122
 - ✓ Washington – 4% or 20,827
- Of the 118,142 people experiencing homelessness in California, 66 % (78,390 people) were without shelter and 34% (39,752) were staying in emergency shelters, transitional housing, or safe havens.



CALIFORNIA



Total Homeless, 2016
118,142



■ Unsheltered (78,390)
■ Sheltered (39,752)

Estimates of Homelessness

97,660 individuals

20,482 people in families
with children

11,222 unaccompanied youth

9,612 veterans

29,802 chronically homeless
individuals

Homelessness in Riverside County

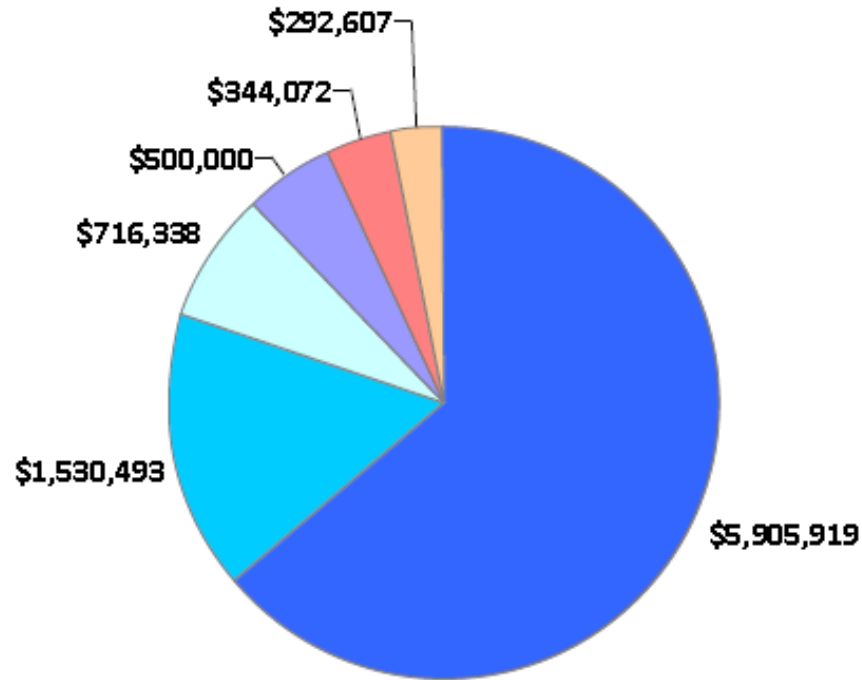


HUD CoC Program Award

Year	Amount
2016	\$9,385,526.00
2015	\$9,289,429.00
2014	\$9,857,934.00
2013	\$8,179,863.00
2012	\$8,145,280.00
2011	\$7,546,621.00
2010	\$6,417,347.00

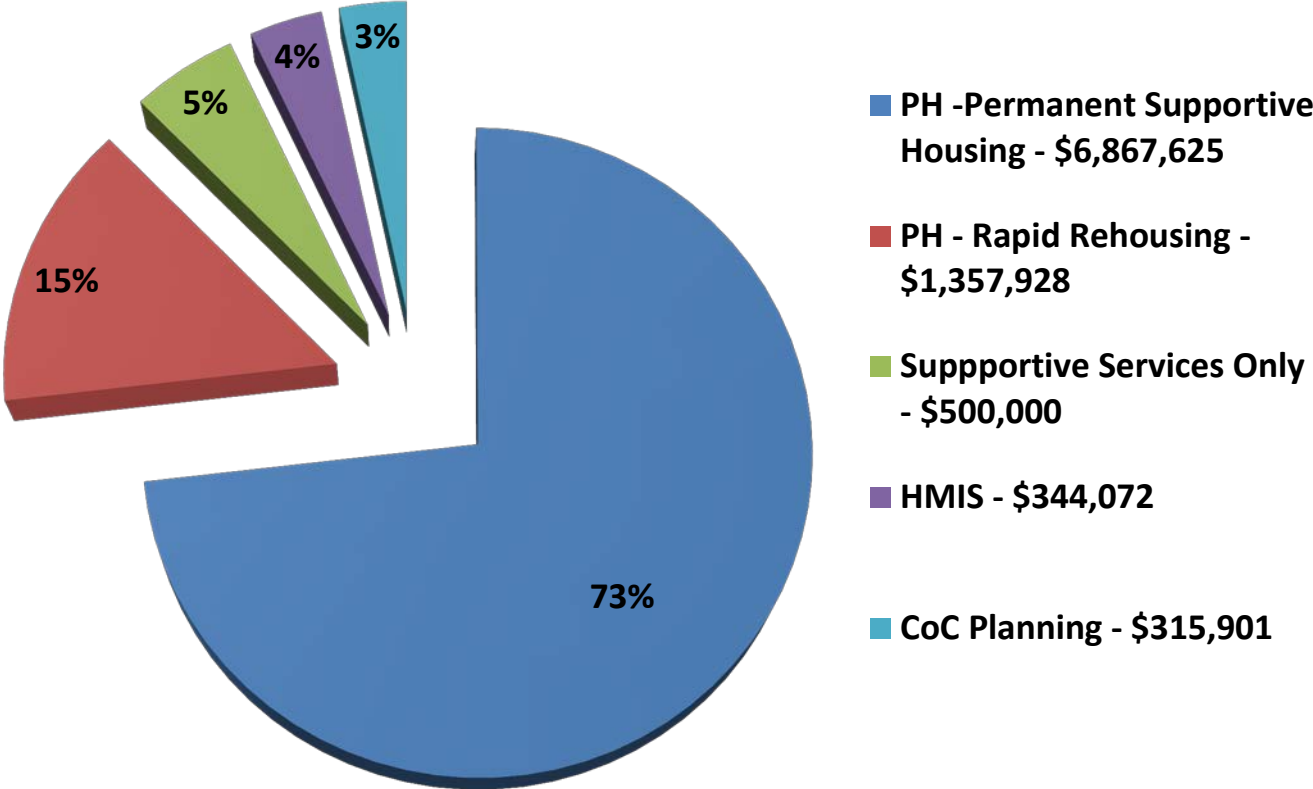


2015 Total Award Amount
\$9,289,429.00



- PH - Permanent Supportive Housing
- PH - Rapid Re-housing
- Transitional Housing
- Supportive Services Only
- HMIS
- CoC Planning Project

2016 Total Award Amount = \$9,385,526



Overview of HMIS Data

- ▶ **Number of Users -137**

- ▶ **Projects by Funding Type (2016) - 78**
 - ❖ HUD CoC -32
 - ❖ ESG -27
 - ❖ VA -12
 - ❖ RHY - 5
 - ❖ PATH - 2

- ▶ **Projects per Housing Type - 76**
 - ❖ PSH -20
 - ❖ TH -9
 - ❖ SO -6
 - ❖ HP -8
 - ❖ RRH -18
 - ❖ ES -15

HMIS Data –10/1/15 to 9/30/16

▶ Total number of clients served: **6,636**

✓ ES	- 3,926
✓ TH	- 817
✓ PSH	- 702
✓ RRH	- 1,191

How Many are Homeless in Riverside County

- 2,372 – Total # of people experiencing homelessness
 - 884 – Sheltered
 - 1,488 – Unsheltered
- 2,165 – Total # of people experiencing homelessness
 - 814 – Sheltered
 - 1,351 – Unsheltered

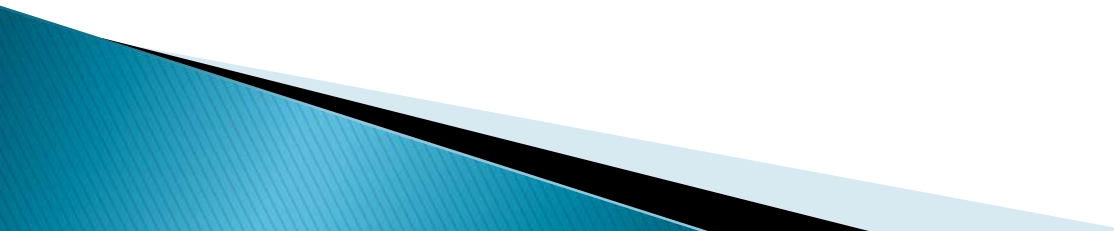
2015 PIT

2016 PIT



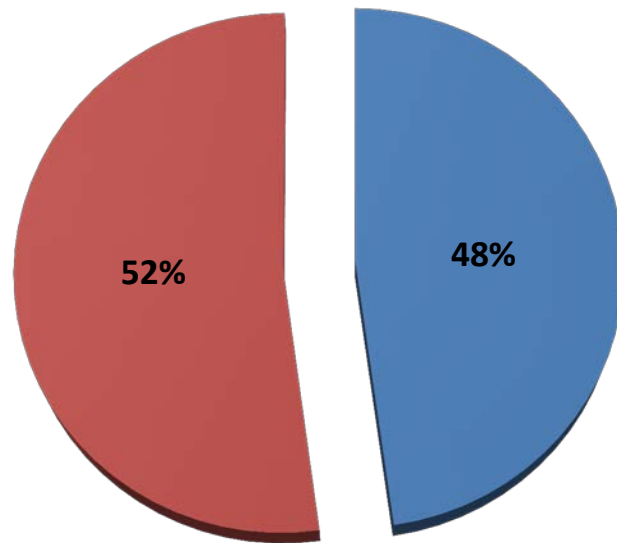
2016 PIT

Estimates of Homelessness

- ❖ 1,900 individuals
 - ❖ 265 people in families with children
 - ❖ 157 unaccompanied youth
 - ❖ 211 veterans
 - ❖ 378 chronically homeless individuals
- 

2016 PIT

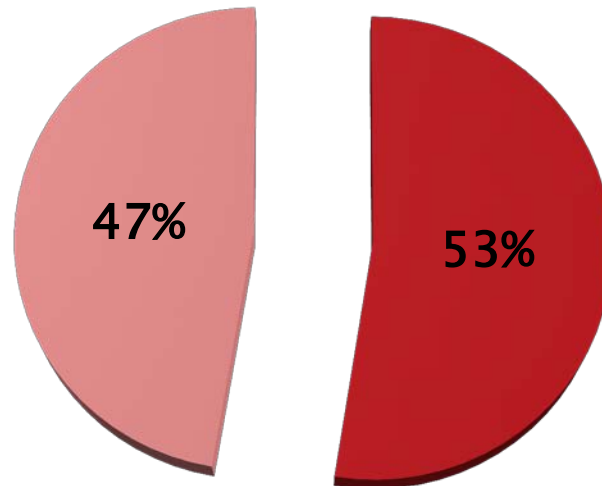
Total number of unaccompanied youth (157)



■ Sheltered (75) ■ Unsheltered (82)

2016 PIT

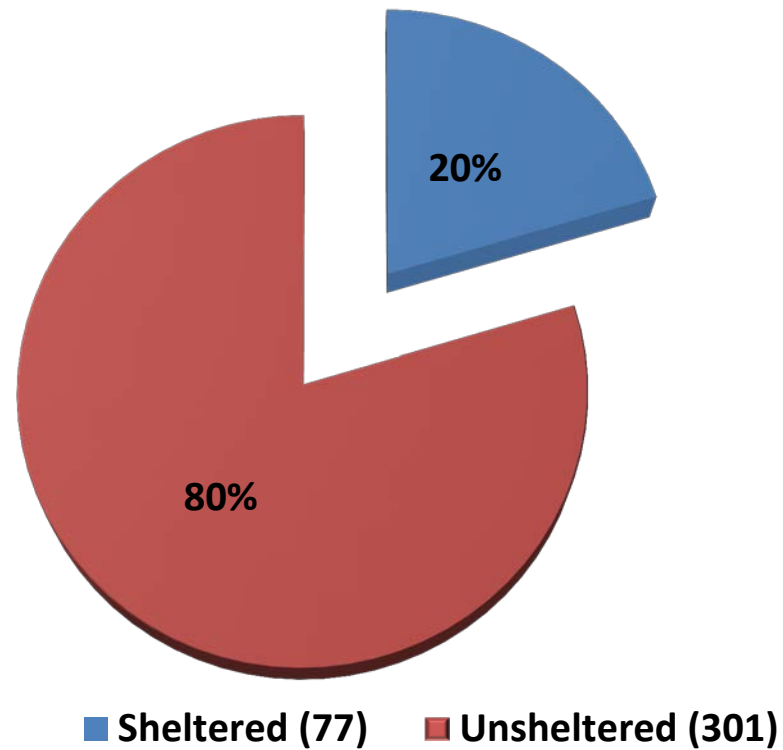
Total Number of Veterans (211)



■ Sheltered (111) ■ Unsheltered (100)

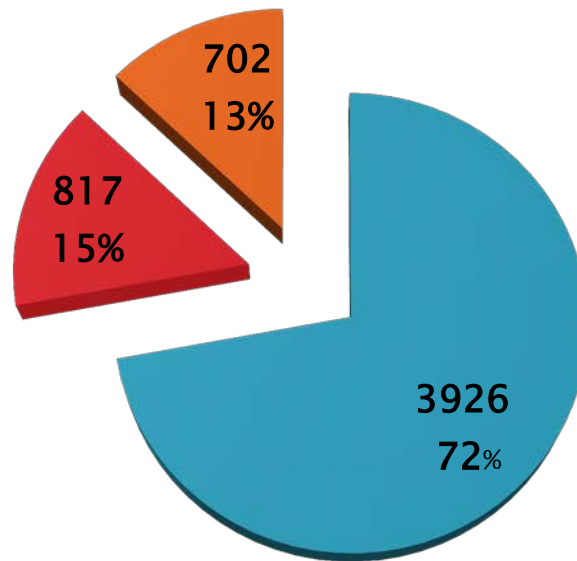
2016 PIT

Chronically Homeless Individuals and Person in Families (378)



AHAR – 10/1/15 to 9/30/16

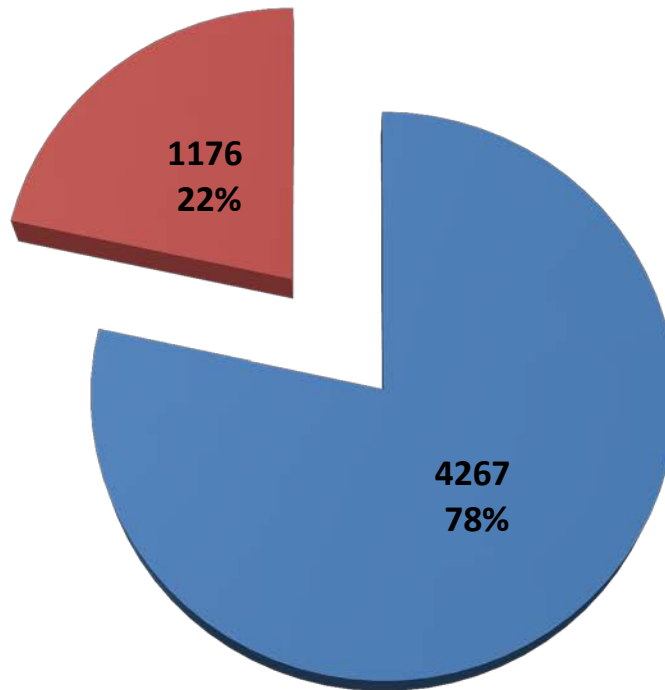
Total Homeless Persons Per Housing Type – 5,445



■ Emergency Shelters ■ Transitional Housing ■ Permanent Supportive Housing

AHAR – 10/1/15 to 9/30/16

Total Adults & Children



■ Number of Adults ■ Number of Children

AHAR – 10/1/15 to 9/30/16

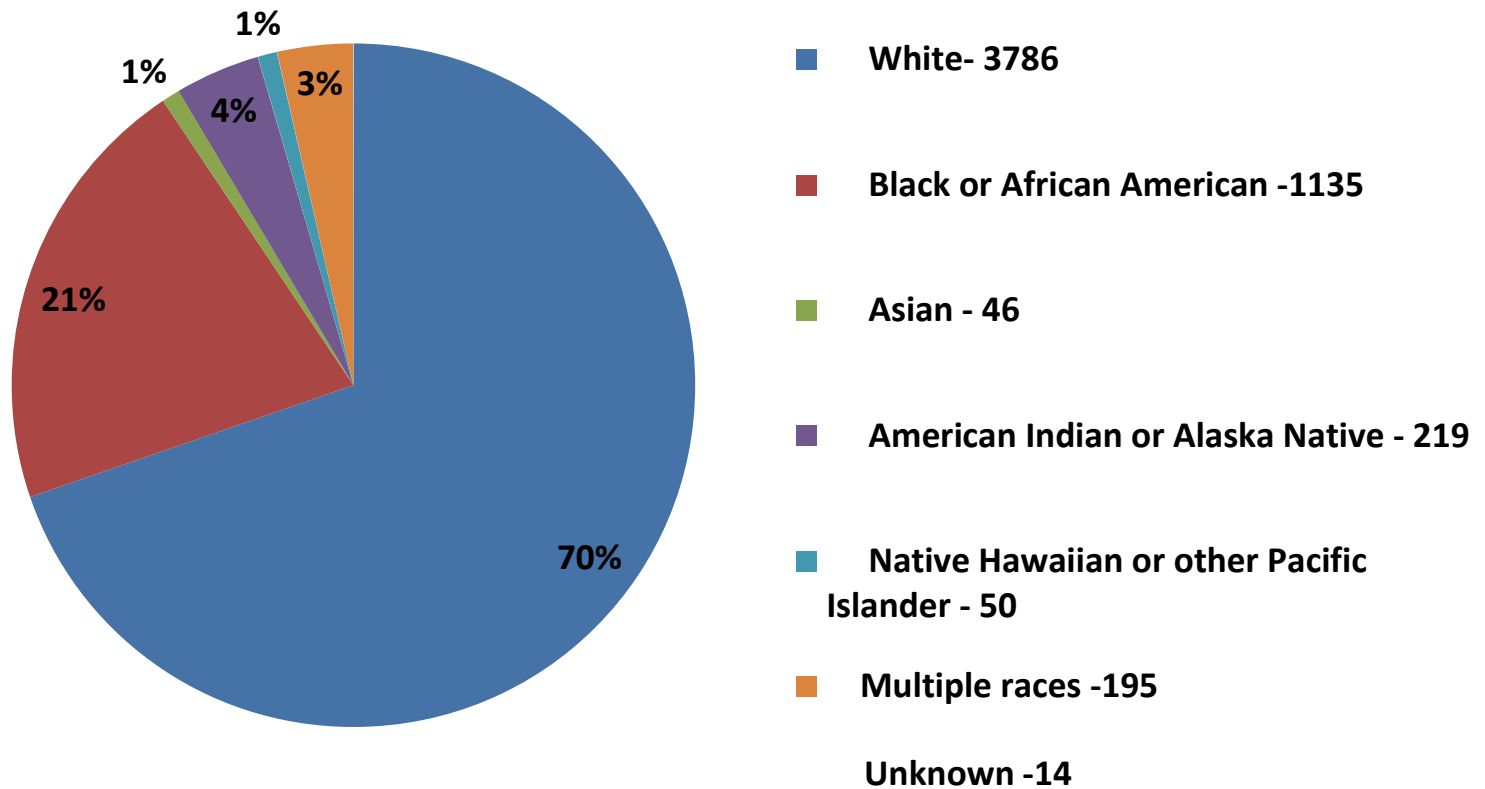
ETHNICITY



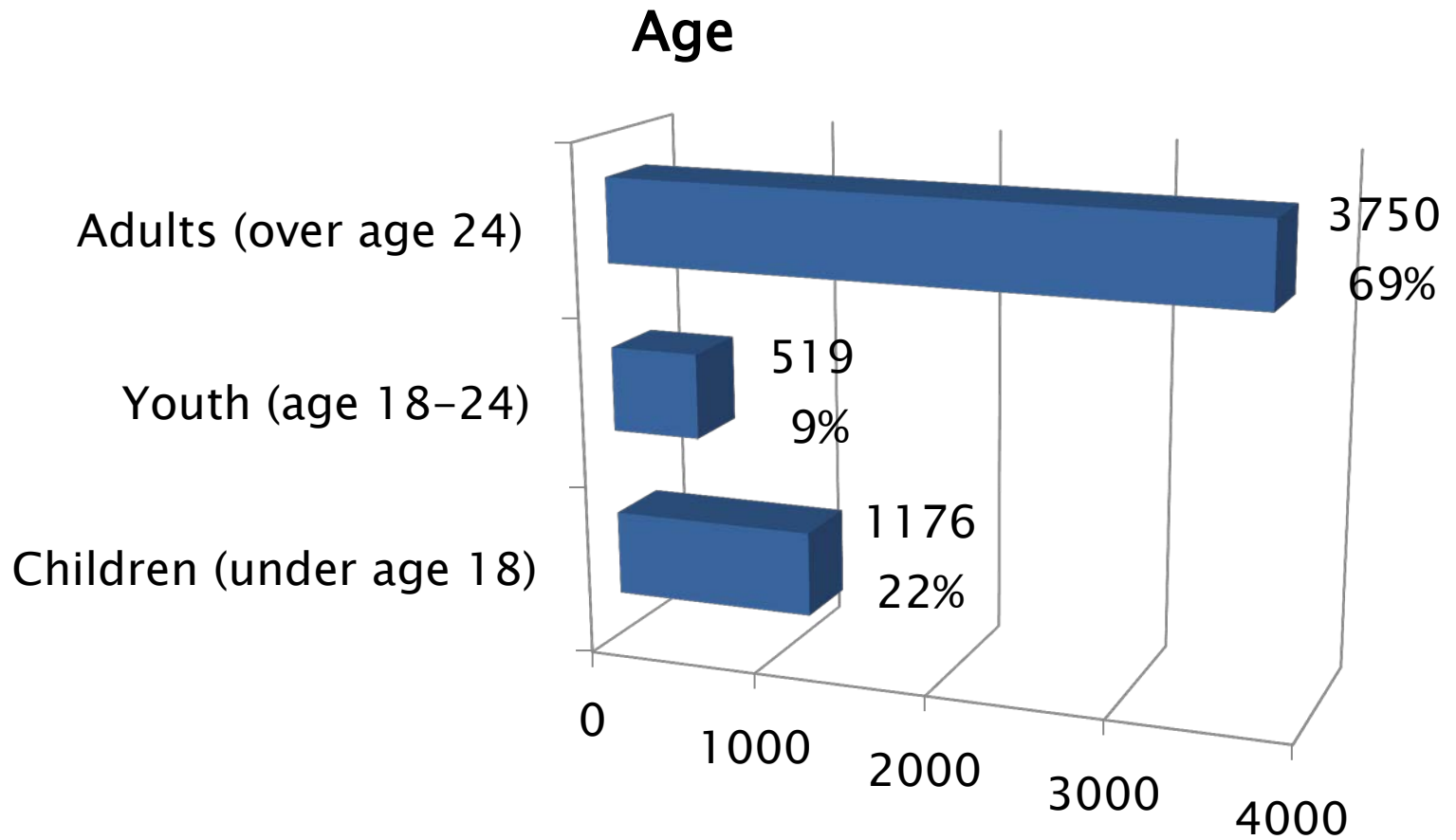
	ES	TH	PSH	Total
Non-Hispanic Non-Latino	2,527	441	492	3,460 (64%)
Hispanic/ Latino	1,395	376	210	1,981 (36%)
Unknown	4	0	0	4

AHAR – 10/1/15 to 9/30/16

Race

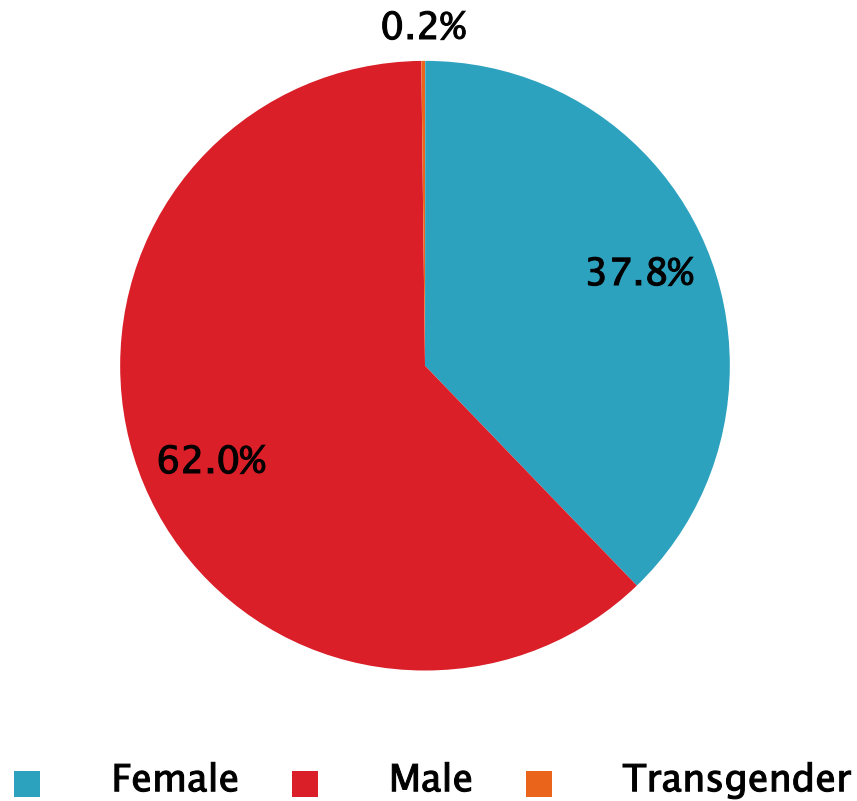


AHAR – 10/1/15 to 9/30/16



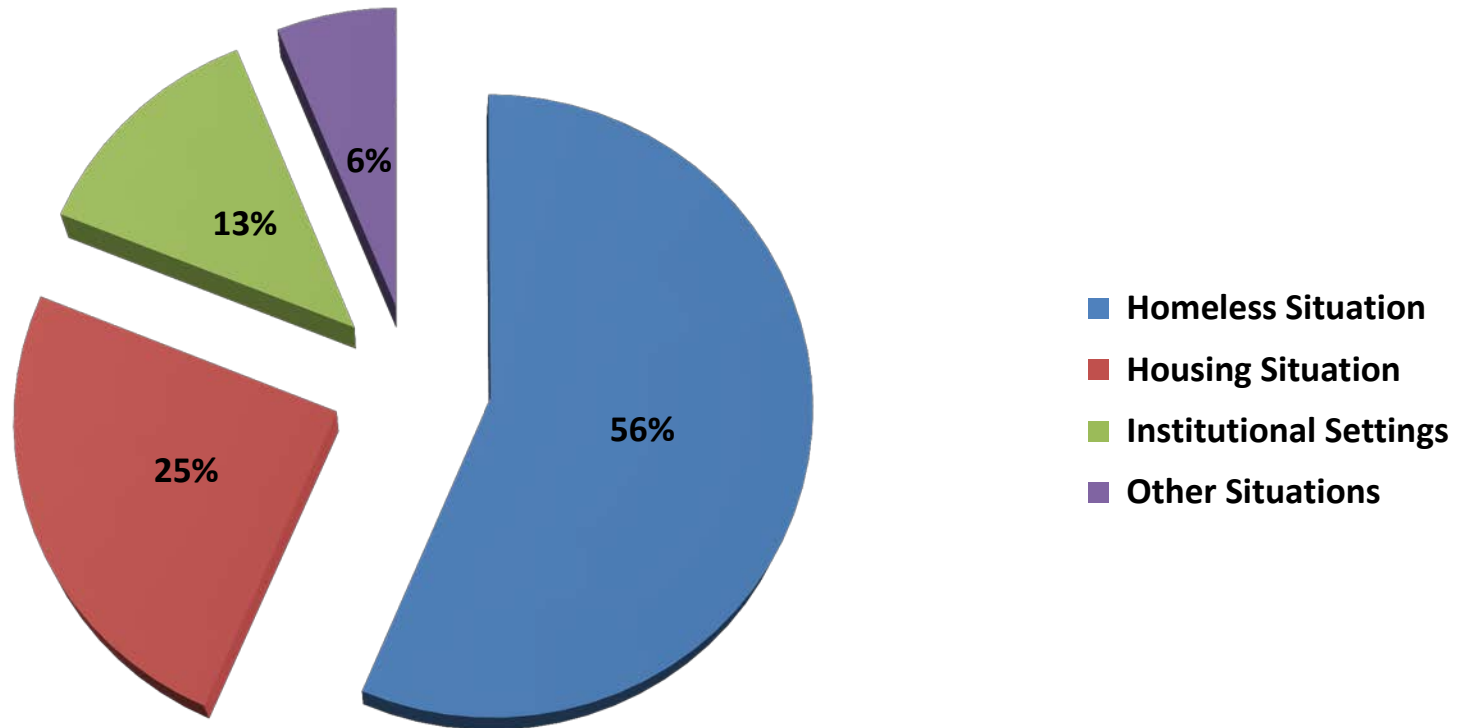
AHAR – 10/1/15 to 9/30/16

Gender of Adults



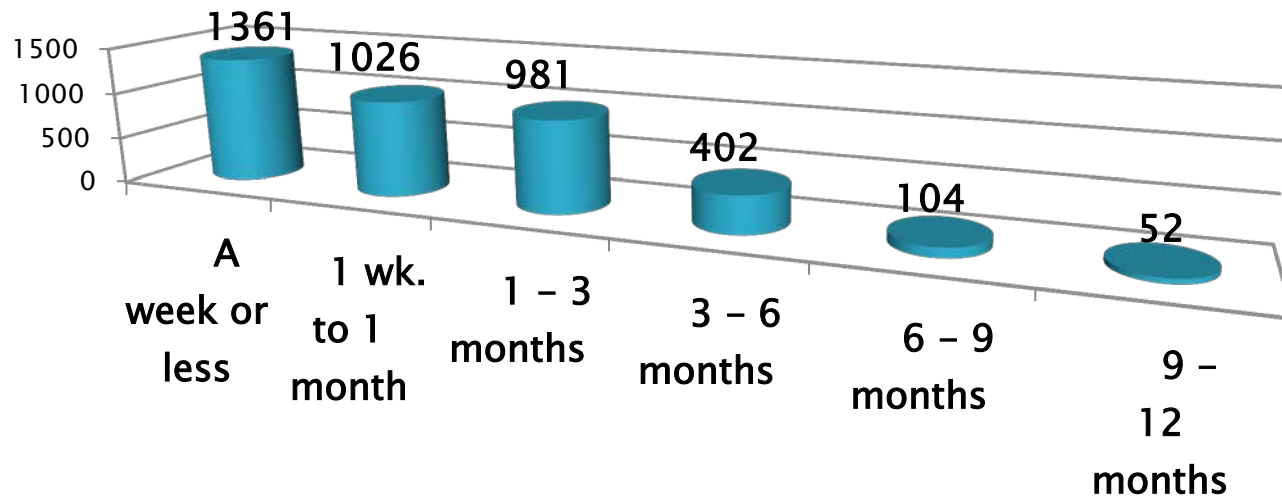
AHAR – 10/1/15 to 9/30/16

Living Arrangement the Night before Program Entry



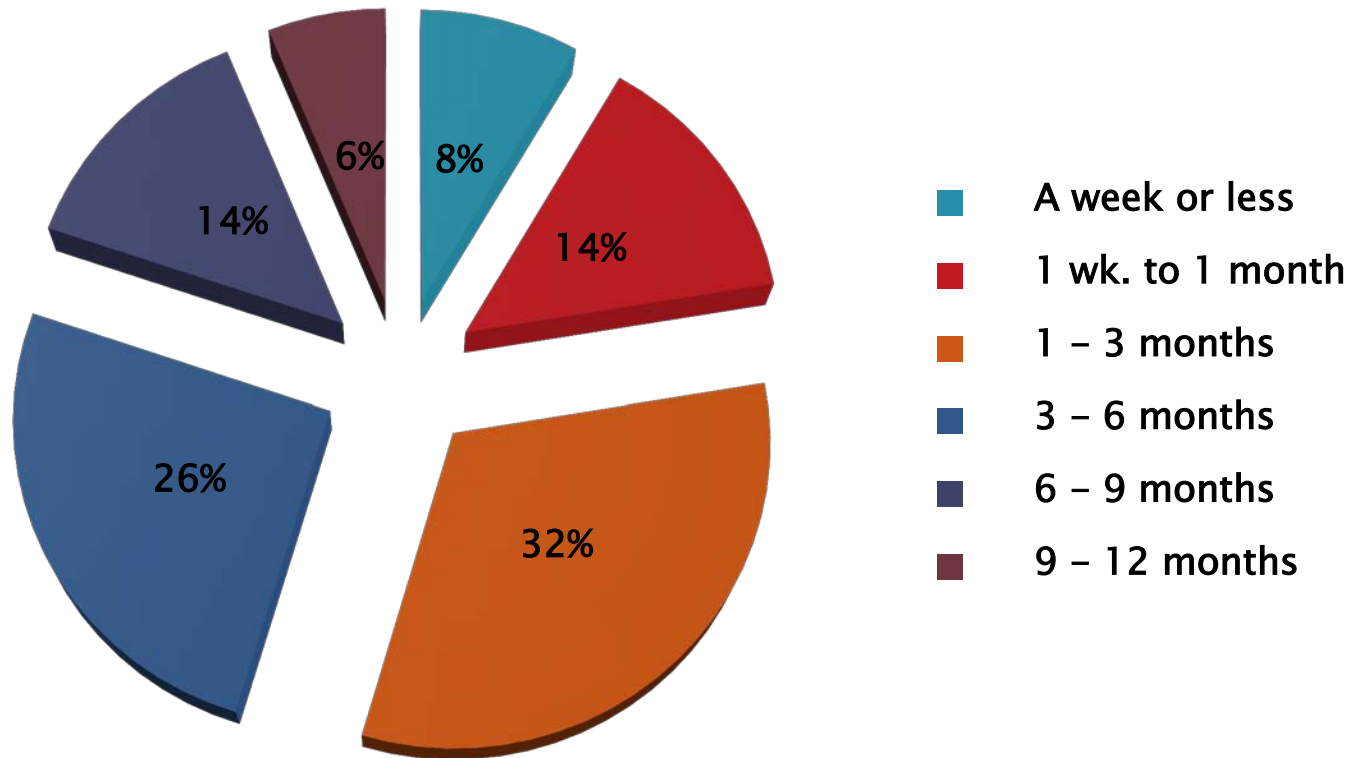
Length of Stay	Emergency Shelters	Transitional Housing
<i>A week or less</i>	1361	69
<i>1 wk. to 1 month</i>	1026	114
<i>1 - 3 months</i>	981	263
<i>3 - 6 months</i>	402	209
<i>6 - 9 months</i>	104	111
<i>9 - 12 months</i>	52	51

Length of Stay in Emergency Shelter



AHAR – 10/1/15 to 9/30/16

Length of Stay in Transitional Housing



Rapid Rehousing

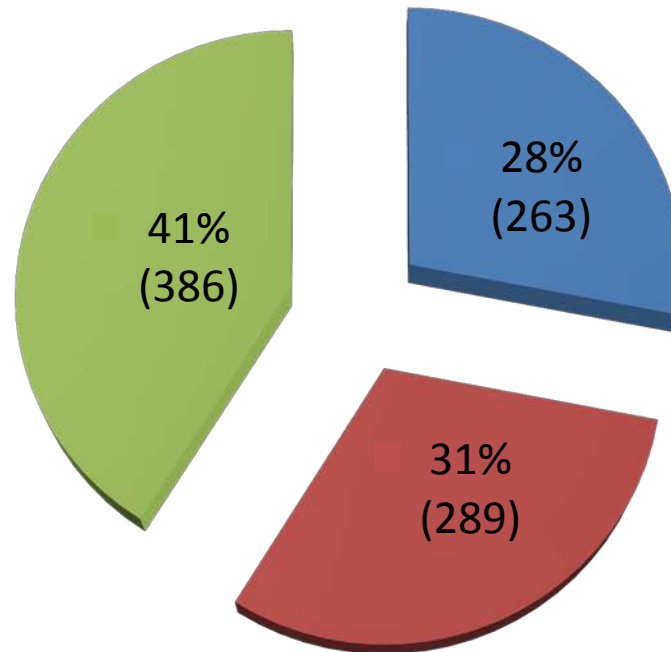
Reporting Period 10/1/15 to 9/30/16

Total Number of Unduplicated Clients	1191
--------------------------------------	------

Total Number of Households	515
----------------------------	-----

Rapid Rehousing

Households with at least one adult and one child



■ ESG ■ SSVF ■ HUD CoC

Prior Zip Codes

	Total Clients	Within Riverside County	Outside Riverside County	
ES	3188	2492 78%	696 22%	San Bernardino, Los Angeles, San Diego, Las Vegas, Arizona, Texas, Chicago, Camden, Calexico, Ohio, Kansas, Milwaukee, Alaska, Mississippi, Minneapolis, Albuquerque, Florida, Indianapolis, Chattanooga, Chesapeake, Lebanon
TH	198	174 88%	14 12%	San Bernardino County, San Diego, Anaheim, Yorba Linda, North Hollywood, Napa
RRH	683	612 90%	71 10%	San Bernardino County, San Diego, Las Vegas, Monrovia, Elk Grove, Fresno, Manhattan
PSH	650	586 90%	64 10%	San Bernardino, Los Angeles, Long Beach, Glendora, Norwalk, La Jolla, Dixon, Dayton, Rapid City

Data is from 1/1/16 – 12/31/16 and from the first client enrollment where zip code data was collected (per project type).

2016 Bed Coverage Rate* – HIC

	Total Beds	Total Beds Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
ES	756	120	594 (42beds not in HMIS)	93.40%
TH	334	0	334	100%
RRH	292	0	292	100%
PSH	1,538	0	630	40.96%

2016 NOFA threshold is **85%**

**HMIS bed coverage rate is equal to the total number of beds in HMIS divided by the total bed inventory (beds in HMIS plus beds not in HMIS). The bed coverage rate should account for all beds in the community, including both HUD and non-HUD funded beds.*

Bed Utilization*

Reporting Period	ES	TH	PSH
10/28/2015	82%	88%	93%
1/27/2016	85%	92%	93%
4/27/2016	93%	82%	97%
7/27/2016	91%	76%	96%
	87.75%	84.5%	94.75%

**A bed utilization rate is equal to the total number of people served on any given day divided by the total number of beds available on that day.
Bed Utilization Rate = $\frac{\text{(Total \# of people served on a given day)}}{\text{(Total \# of beds available on that day)}}$*

Key Findings: System Performance

DATA QUALITY

- ✓ Good
- ✓ Some missing data

LENGTH OF TIME HOMELESS

- ✓ ES – average 50 days
- ✓ ES and TH – 80 days

RATE OF RETURN TO HOMELESSNESS

6 MONTHS

- ✓ SO – 7% (121)
- ✓ ES – 10% (77)
- ✓ TH – 11% (772)
- ✓ PH – 12% (107)

24 MONTHS

- ✓ SO – 22%
- ✓ ES – 19%
- ✓ TH – 20%
- ✓ PH – 20%

RATE OF EXIT TO PERMANENT HOUSING DESTINATIONS

- ✓ SO – 69% successful exits
- ✓ ES, TH, PH-RRH – 36% successful exits

PERMANENT HOUSING PLACEMENT/RETENTION

- ✓ PH (except RRH) - 95%

EMPLOYMENT AND INCOME GROWTH

- ✓ Increased earned income: S-7%; L- 33%
- ✓ Increased non-employment income: S - 36%; L19%
- Increased total income: S - 41%; L- 50%



Resources

- ▶ 2016 AHAR: Part 1 – PIT Estimates of Homelessness in the U.S.

<https://www.hudexchange.info/resource/5178/2016-ahar-part-1-pit-estimates-of-homelessness/>

- ▶ HUD Homelessness Data Exchange

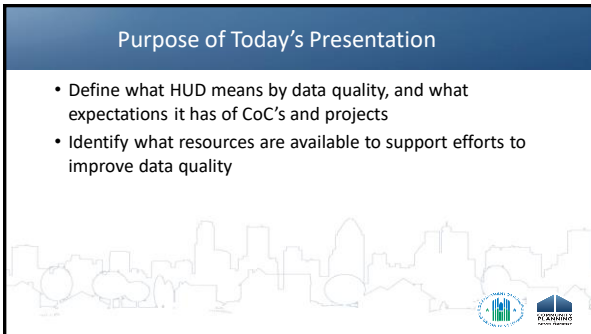
<http://www.hudhdx.info/>

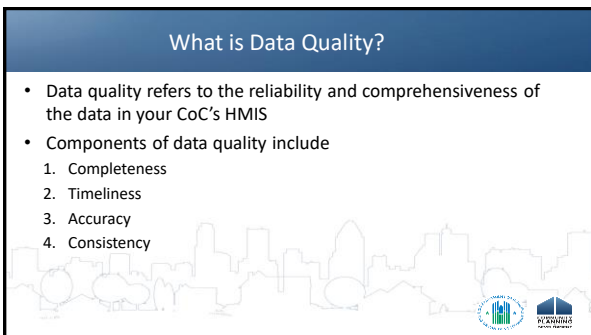
- ▶ County of Riverside 2016 PIT Report
- ▶ County of Riverside 2016 HIC Report
- ▶ County of Riverside HMIS Data

**“If it is not in HMIS,
it did not happen”.**

HUD







Completeness

- Completeness is defined as the degree to which HMIS records do not include partial or missing data (e.g. partial date of birth)
- Completeness can also capture the lack of data from projects not participating in HMIS (e.g. low bed coverage rate)



Timeliness

- Timeliness reflects the period between when client data is collected/known and when that information is entered into HMIS
- If data is not entered into HMIS shortly after it is known, then there is likely an increase in the potential for inaccuracies or errors in the data once it is in HMIS




Accuracy

- Accuracy is evident when the data in HMIS reflects the actual characteristics and experiences of clients
- Inaccurate data significantly limits the ability of HMIS to serve as a tool in the community's efforts to reduce homelessness




Consistency

- Consistency is the degree to which the data is collected and stored in a uniform manner, across all users of the HMIS
- If users do not have a shared understanding of when, how and why data should be collected in HMIS, then it is likely that the data will not be accurate




Why does Data Quality matter?

- Central to HUD and federal partners' work to end homelessness, is the ability to demonstrate progress towards the key indicators in the federal strategic plan to end homelessness (Opening Doors)
- Quality data allows HUD and communities to identify what strategies to end homelessness are working effectively, and to anticipate and identify trends in the effort to end homelessness




HUD's Vision for Data Quality

- It is essential for CoCs to talk openly and regularly about data quality and its impact in understanding homelessness in a community.
- CoCs should:
 - Connect their data quality efforts to reporting via the **HMIS Data Quality Framework, System Performance Measures (SPMs) and Annual Performance Report (APR)**; and
 - Design and implement a sustainable and transparent **Data Quality Management Program**.



HUD's Data Quality Framework


- Intended to allow for standard data quality guidance across HUD reports
- HMIS software must be updated to include the data quality framework by April 1, 2017
 - CoCs will first submit this data in the SPM reports submitted between April 3-May 31, 2017
 - Projects will first submit to HUD in their APRs (beginning April 1, 2017)



HUD Data Quality Framework

DQ Report – Q1 Validation

	A	B
1	Total number of persons served	
2	Number of adults (age 18 or over)	
3	Number of children (under age 18)	
4	Number of persons with unknown age	
5	Number of leavers	
6	Number of adult leavers	
7	Number of adult and head of household leavers	
8	Number of stayers	
9	Number of adult stayers	
10	Number of veterans	
11	Number of chronically homeless persons	
12	Number of youth under age 25	
13	Number of parenting youth under age 25 with children	
14	Number of adult heads of household	
15	Number of child and unknown-age heads of household	
16	Heads of households and adult stayers in the project more than 365 days	




HUD Data Quality Framework

DQ Report – Q2 Personally Identifiable Information (PII)

	A	B	C	D	E
1	Data Element	Client Doesn't Know/Refused	Information Missing	Data Issues	% of Error Rate
2	Name (3.1)	= 8 or 9	=missing	= 2	=(total)/VAL.B1
3	Social Security Number (3.2)	= 8 or 9	=missing	= rule	=(total)/VAL.B1
4	Date of Birth (3.3)	= 8 or 9	=missing	= 2	=(total)/VAL.B1
5	Race (3.4)	= 8 or 9	=missing		=(total)/VAL.B1
6	Ethnicity (3.5)	= 8 or 9	=missing		=(total)/VAL.B1
7	Gender (3.6)	= 8 or 9	=missing		=(total)/VAL.B1
8	Overall Score				=(total)/VAL.B1


2 - Number of Responses



HUD Data Quality Framework

DQ Report – Q3 UDE


	A	B	C
1 Data Element		Error Count	% of Error Rate
2 Veteran Status (3.7)		=B, 9, missing or rule]	=B2/VAL.B2
3 Project Entry Date (3.10)		=trule]	=B3/VAL.B1
4 Relationship to Head of Household (3.15)		=missing or rule]	=B4/VAL.B1
5 Client Location (3.16)		=missing or rule]	=B5/(VAL.B14+VAL.B15)
6 Disabling Condition (3.8)		=B, 9, missing or rule]	=B6/VAL.B1



HUD Data Quality Framework

DQ Report – Q4 Income & Housing DQ


	A	B	C
1 Data Element		Error Count	% of Error Rate
2 Destination (3.12)			=C2/VAL.B5
3 Income and Sources (4.2) at Entry			=C3/(VAL.B14+VAL.B15)
4 Income and Sources (4.2) at Annual Assessment			=C4/VAL.B16
5 Income and Sources (4.2) at Exit			=C5/VAL.B7



HUD Data Quality Framework

DQ Report – Q5 Chronic Homelessness

	A	B	C	D	E	F	G
1 Entering into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate Date started (3.917.3)	Number of times (3.917.4)	Number of months (3.917.5)	% of records unable to calculate
2 ES, SH, Street Outreach				OK/N/misusing	OK/N/misusing	OK/N/misusing	
3 TH							
4 PH (all)							
5 Total		=B2+B3 +B4					




HUD Data Quality Framework

DQ Report – Q6 Timeliness

	A	B	C
1	Time for Record Entry	Number of Project Entry Records	Number of Project Exit Records
2	0 days		
3	1-3 days		
4	4-6 days		
5	7-10 days		
6	11+ days		


DQ Report – Q7 Inactive Records in Street Outreach & Emergency Shelter

	A	B	C	D
1	Data Element	# of Records	# of Inactive Records	% of Inactive Records
2	Contact (Adults and Heads of Household in Street Outreach or ES – NIN)			-C2/B2
3	Bed Night (All clients in ES – NIN)			-C3/B3



HUD System Performance Measures


- When working to make Data Quality a central part of the CoC and HMIS efforts, consider the impact that poor data quality has on the HUD System Performance Measures
 - Has your CoC carefully reviewed the SPM data submitted this year?
 - Were there any problem issues with your data that may have lead to inaccurate reporting?
 - Have you considered if you will resubmit the data?



HUD System Performance Measures

HMIS Data Elements Applicability by Measure
(assess each for data quality for the appropriate time period to build the report)

Data Element #	Data Element Name	Measure						
		1	2	3	4	5	7	
2.2.2	Project Type	X	X	X	X	X	X	
2.5	Method for Tracking Emergency Shelter Utilization	X						
2.6	Federal Partner Funding Source(s)				X			
3.2	Date of Birth			X				
3.10	Project Entry Date	X	X	X	X	X	X	
3.11	Project Exit Date	X	X	X	X	X	X	
3.13	Destination		X				X	
4.2	Income and Sources				X			
4.17	Residential Move-in Date	X						



HUD System Performance Measures

- CoC and HMIS Lead should work together to identify and resolve any potential data quality issues related to:
 - Project set up
 - Client de-duplication across the system
 - Client project enrollment data (entry/exit dates, destination, residential move-in date)



Annual Performance Report (APR)

- Allows for individual agencies to identify potential data quality issues
- APR includes data quality framework tables
- Encourage CoCs and projects to regularly review and utilize APR data to understand how the project's performance and/or data quality issues are potentially impact system work, including SPMs



DATA QUALITY MANAGEMENT PROGRAM



Data Quality Management Program

- In anticipation of the HMIS Final Rule, and in response to NOFA scoring criteria for the CoC Program, many CoCs have created data quality plans
- There are not yet HUD requirements for these data quality plans, but more guidance is anticipated
- Generally, Data Quality Plans should include guidance on:
 - Baseline expectations for **accuracy, completeness, and timeliness**
 - Protocols for reviewing and monitoring for **accuracy, completeness, and timeliness**



Why a DQ Management Program?



Components of a DQ Management Program

1. Identify Your Baseline
2. Secure CoC Buy-In
3. Develop a Data Quality Plan
4. Execute enforceable agreements
5. Ongoing monitoring and reporting
6. Create incentives and enforce expectations




Creating your DQ Management Program



The meme shows Homer Simpson in a control room, looking confused with his hands on his head. The text 'I DON'T KNOW' is at the top and 'WHERE TO BEGIN' is at the bottom. Logos for the Department of Health and Human Services and the Office of the Mayor are visible in the bottom right corner.


Identify Your Baseline

- Important to take stock of where you are now
 - Do you know how many of the homeless assistance and homelessness prevention projects in your CoC, are actively participating in HMIS? **Baseline for bed coverage**
 - Have you recently run data completeness reports for your full HMIS implementation? **Baseline data completeness**
 - When CoC leaders, project staff and HMIS Lead staff review reports, does the data seem accurate? **Baseline for accuracy**



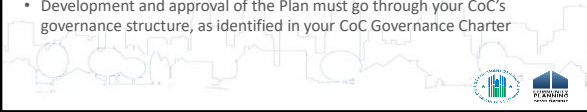
Ensure CoC Leadership Buy-In

- Important to clarify up front what the expectations are for the data quality program
 - CoC will need to review and approve the DQ Plan
 - CoC should also be heavily involved in determining expectations for monitoring and compliance
- **This work cannot and should not fall just on the shoulders of the HMIS Lead Agency**



Develop Your Data Quality Plan

- Data Quality Plan should be informed by your understanding of your baseline, and should reflect where your CoC wants to move the system
- Plan should be clear and concrete, and should set standards across all four elements of data quality
- Plan should also outline what the impact will be if an agency does not meet the standards
- Development and approval of the Plan must go through your CoC's governance structure, as identified in your CoC Governance Charter



Execute Enforceable Agreements

- Enforceable agreements are critical
- Need to be completed by all agencies participating in HMIS
- Should provide guidance on what the consequences are for failure to meet the standards in the DQ Plan, as well as the incentives
- Identify the process for notification of failure to meet a standard
- Lay out the responsibilities of BOTH the HMIS participating agency and the HMIS Lead and CoC



Ongoing Monitoring and Reporting

- Once the HMIS Data Quality Plan has been reviewed and approved by the CoC and agreements are in place, it's time to get out there and implement
- Will need to train/communicate to agencies and users first, to ensure that all users understand the expectations
- Encourage the CoC to allow for a grace period
- **Transparency with results is key**



Ongoing Monitoring and Reporting

- Set of procedures that outlines a regular, ongoing process for analyzing and reporting on the reliability and validity of data
 - Program and aggregate systems levels
- Primary tool for tracking and generating information necessary to identify areas for data quality improvement
- Includes procedures and frequency for data review
- Highlights expected data quality goals, steps to measure progress and the roles and responsibilities for ensuring data is reliable and valid



Create incentives and enforce agreements

- Important to celebrate successes and to allow room for growth
- Make the connection between the HMIS DQ efforts and other CoC lead efforts
 - Impact of improved data quality on the accuracy of System Performance Measures and other local data analysis
 - Impact of improved data quality on the ability to generate a By-Name or Prioritization List, to use HMIS for coordinated entry, etc.




Key Considerations

- Ensure all stakeholders are clear on roles and responsibilities
 - Establish tasks and timing of tasks
- Make data quality a standing CoC meeting agenda topic
- Ensure data quality monitoring and compliance procedures conclude **BEFORE** project level/system level data is published or reported
- Compare data element completion rates for every project
- Use quality data to measure system/program performance




Key Considerations

- Have they been discussed in a public forum, to allow for feedback and to generate buy-in from the CoC?
- How far back do you need to go in terms of data quality improvements? Are you looking at “old” data? How does poor data quality impact your reporting efforts?
- Will these expectations extend to all homeless assistance and homeless prevention programs in the community?



Next Steps for Communities

- **Don't wait!!** The quality of your data now will impact your reporting capacity, including the APR and System Performance Measure reports (submitted this Spring)
 - Map out your baseline
 - Discuss the Data Quality Framework results with your CoC leadership
 - Work with the CoC on the development of a DQ Management Program
 - Review sample HMIS Data Quality Plans (they're on the web!)
 - Spend time thinking through monitoring and compliance



HOMELESS SERVICES FOR VETERANS

(SSVF, HUD/VASH, GPD)



In 2009, President Obama and VA Secretary Eric Shinseki set an ambitious plan to end veteran homelessness by the end of 2015. The Administration made the elimination of veteran homelessness a national priority.



RESOURCES AVAILABLE INCLUDE:

- Grant & Per Diem Programs
- Supportive Services for Veteran Families (SSVF)
- HUD/VASH Vouchers



SUPPORTIVE SERVICES FOR VETERAN FAMILIES

SSVF provides rapid re-housing and homeless prevention services to veteran families. The SSVF Program includes:

- ❖ Case management services
- ❖ Housing search activities
- ❖ Permanent housing acquisition
- ❖ Limited temporary financial intervention
- ❖ Assistance with applying and securing VA and mainstream benefits

Case
Management



HUD/VASH

**VA HUD/VASH vouchers support
subsidized housing and
on-going case management
services for veteran families**





GRANT & PER DIEM PROGRAMS (GPD)

- ❖ **56 Beds Riverside and San Bernardino Counties.**
- ❖ **Service-Intensive Transitional Living Services.**
- ❖ **Serves different veteran populations.**

CHANGES TO THE GPD PROGRAM

- New NOFA released to fund existing GPD programs
 - 5 Different models
 - Bridge Housing
 - Low Demand
 - Hospital to Housing (Respite Care)
 - Clinical Treatment
 - Service-Intensive Transitional Housing
-
- **New services will begin October 1, 2017**

SO HOW DO I REACH YOU????

Loma Linda VA (909) 825-7682

Danielle Moore ext. 1773 VA GPD Liaison ext. Danielle.Moore@va.gov

SSVF Providers:

LightHouse Social Service Centers Janie Stephans (951) 571-3533;
Janies@LightHouse-ssc.org

US VETS Marcus Dillare (213) 334-8158 mdillard@USVETSINC.org

KEYS (909) 332-6388 Reeknola Jarmon rjarmon@keysnonprofit.org


HUD/VASH Supervisors:

Caron Bayer ext.5024 Caron.Bayer@va.gov



Enid Hairston-Reece ext. 4609 Enid.Hairston-Reece@va.gov




**Most people will look the other way. I will NOT.
They deserve our honor, our thanks, our respect and our help!**





HUD System Performance Measures






What is System-level Performance?



- CoC are charged with designing a local “system” to assist people experiencing homelessness in their area
- The McKinney-Vento Act, as amended by the HEARTH Act, is broadening the federal performance paradigm
- System performance creates accountability for how well the entire CoC serves people experiencing homelessness





Purpose of System Performance Measures

- Ensure common understanding of system intent and goals, along with the projects that make up the CoC system
- Focus on measuring the cumulative impact of programs, not just their individual impact
- Help CoC gauge their progress toward preventing and ending homelessness
- Identify areas for improvement
- Meet HEARTH requirements



Setting Local Performance Targets

- HUD will use the system performance data to establish national targets
- Communities should use national targets as benchmarks for setting local targets
- Local targets should take into account
 - The nature of the local homeless population (e.g., prevalence of youth)
 - Local priorities as CoC implement system change
 - Other unique local circumstances
- HUD is not setting targets for subpopulations but communities should account for subpopulation types when setting targets

HUD

CoCs

National Targets

Levels of Performance Measurement

Success here may be based on client stories, although we can use data to measure progress.

Individual
 Purpose: Receive housing
 Questions: Is it working? Why or why not?

Success here is based on program effectiveness. We want to demonstrate the intervention works.

Agency/Program
 Purpose: Provide PSH
 Questions: Is it working? If so, why? If not, what do we need to fix?

Success here is based on the ability of the system to work together as a whole.

Continuum of Care
 Purpose: End Homelessness
 Questions: Is it working? If so, why? If not, what do we need to fix?

Performance Measurement Building Blocks

- **Inputs** include resources dedicated to, or consumed by, the system—e.g., money, programs, facilities.
- **Activities** are what the system does with the inputs to fulfill its mission, such as providing shelter, feeding the homeless, or providing job training.

Performance Measurement Building Blocks

- **Outputs** are the direct products of system activities. They usually are presented in terms of the volume of work accomplished—e.g., number of participants served, number of service engagements, number of shelter nights.
- **Outcomes** are benefits or changes among clients during or after participating in system activities. **Outcomes may relate to change in client knowledge, attitudes, values, skills, behaviors, conditions, or other attributes.**

7

Setting Your Outcome & Objectives

- Outcomes – Shows the benefit of the intervention to the client, agency, or system. Shows change and some of that change may be progressive. We can demonstrate these in our outcomes and the corresponding objectives.
- For example:
 - Outcome: Increase stable employment among formerly homeless individuals.
 - Outcome objective: **Increase** stable employment by **50%** among formerly homeless individuals within **1 year**.
 - Employment at entry (baseline)
 - Employment status at exit (intermediate)
 - Employment status at 6 month or year follow-up (long-term)
- Note SMART Objectives

How Did HUD Decide How to Calculate the Measures?

- In deciding the best way to calculate the performance measures HUD sought to balance getting the most accurate information with the limits and burden of data collection
- Measures have to be considered together
- Most measures rely solely on universal data elements
- CoC Program NOFA will specify how data are to be reported to HUD

Where Will CoC Get the Data to Measure Performance?

- There are 2 primary data sources for the performance measures:
 - HMIS
 - PIT
- CoC will be expected to collect and submit data regardless of data quality or bed coverage
- Data that do not meet coverage and data quality thresholds may affect competitiveness
- HUD published HMIS reporting specifications in May 2015

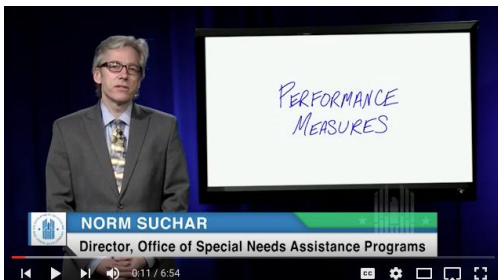
System Performance Measures



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System Performance Measure Videos

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NORM SUCHAR
Director, Office of Special Needs Assistance Programs

https://www.youtube.com/watch?v=SA1HqGzCH8&index=1&list=PL0UjMVs3t0vForsqIFXqpsHBS0_VBcNg



 **1. Length of Time Homeless**


- **Desired Outcome:** Reduction in the average and median length of time persons remain homeless.
- **How this is measured:**
 - Identify the number of days a person is in an emergency shelter, safe haven, transitional housing, and on the street during a one-year period, including any time leading up to that one-year
 - Calculate the average and median length of time for all persons in these kinds of projects during the reporting year



 **2. Returns to Homelessness**


- **Desired Outcome:** Reduction in the percent of persons who return to homelessness
- **How this is measured:**
 - Look back three years ago and identify the number of persons who exited from a homeless assistance project to a permanent housing destination
 - Then look at whether each person returned to a project that requires homeless eligibility within 6, 12, or 24 months of their exit
 - Divide the number of persons who returned to a project requiring homeless eligibility by the total number of persons who had exited to a permanent housing destination



 **3. Number of Homeless Persons**


- **Desired Outcome:** Reduction in the number of persons who are homeless
- **How this is measured:**
 - Identify all sheltered and unsheltered persons identified in the Point-in-Time (PIT) count that year
 - Identify all persons in emergency shelter, safe haven, and transitional housing during the year



 **4. Employment and Income Change**


- **Desired Outcome:** Increase in the percentage of adults who gain or increase income
- **How this is measured:**
 - This is limited to projects that receive HUD's CoC Program funding
 - We measure this in 2 ways based on whether a person was a system stayer or system leaver



 **4. Employment & Income Change: System Stayers**


- **Desired Outcome:** Increase in the percentage of adults who gain or increase income
- **How this is measured for system stayers:**
 - Identify all persons who were in the system at the beginning of the year (i.e., system stayers) and have had an annual assessment during the year
 - Of those stayers, count the number who increased their employment and non-employment cash income during the year



 **4. Employment & Income Change – System Leavers**


- **Desired Outcome:** Increase in the percentage of adults who gain or increase income
- **How this is measured for system stayers:**
 - Identify all persons who exited the system during the year (i.e., system leavers)
 - Of those leavers, who increased their employment and non-employment cash income from the time the entered to the time they exited the system



 **5. Homeless for the First Time**


- **Desired Outcome:** Reduction in the number of persons who become homeless for the first time
- **How this is measured:**
 - Identify all persons who entered a homeless project during the year
 - For each individual, look back two years from the time they entered the program to see if they had been in the system before
 - Count all persons who were not in the system two years prior to entering the project this year



 **6. Returns to Homelessness and Permanent Housing Placement**

- **Desired Outcome:** Reduction in the percentage of Category 3 people who return to homelessness
- **How this is measured:**
 - This measure looks exclusively at persons who are in Category 3 of HUD's homeless definition
 - CoC has to receive approval to serve this population
 - When approved HUD evaluates their performance by looking at:
 - Returns to homelessness (like Measure 2) and
 - Placements into permanent housing destinations (like Measure 7)

 **7a. Placement from Street Outreach**

- **Desired Outcome:** Increase in percentage of people who exit SO permanent housing, temporary destinations (except street), and some institutional destinations
- **How this is measured:**
 - Identify all persons who exited from street outreach
 - Count all persons who exited to some place other than the streets or jails

7b. Placement in or Retention of Permanent Housing

- **Desired Outcome:** Increase in percentage of people who exit to or retain permanent housing
- **How this is measured:**
 - Identify all persons who exited from homeless projects
 - Count all persons who exited to permanent housing destinations

CoC Action Items



CoC Action Items

- Focus on preparing for and understanding the System Performance Measures
- CoC and HMIS leadership can begin to assure that the correct project types are present in HMIS
 - Use the HMIS Project Set Up Tool
 - <https://www.hudexchange.info/resource/4898/hmis-project-set-up-tool/>
- The tool ensures that all HMIS participating projects are set up using the appropriate HMIS project types and are collecting the required data elements
- Appropriate setup is critical for enabling your HMIS to generate System Performance Measures and project-level reporting to federal funders

CoC Action Items

- HUD is emphasizing the system performance measures
- Start with housing your long term homeless and that will vastly improve SPM #1
 - If you identify and house your Top 10 longest stayers your overall length of time homeless will drop dramatically

Resources

<https://www.hudexchange.info/coc/guides/system-performance-measures>

Tool	Use
System Performance Measures Introductory Guide	Overview and explanation of each measure
System Performance Measures in Context	High level summary for CoC stakeholders
System Performance Measures Videos	White board graphics that visually explain each measure
System Performance Measures Tools	System Performance Measures HMIS Programming Specifications System Performance Measures Table Shells
System Performance Measures: 2016 Data Submission Guidance	Instructions for how to enter the data into HDX
