HMIS Advisory Board Meeting Minutes

Monday, January 31, 2022, 1-3 PM Call-in info (audio): 1 218-382-7174 PIN: 583 198 445#

Web: meet.google.com/qaz-bmus-eea

WELCOME AND INTRODUCTION

Chair: Brian Alexander

Brian called the meeting to order at 1:03 PM and welcomed everyone to the virtual meeting.

Members present: Brian Alexander (Chair, Bal. of State, NCCEH), Rachel Waltz (Vice-Chair, Orange, Orange County Hsg Dept.), Lloyd Schmeidler (Secretary, Durham, City of Durham CDD), Hanaleah Hoberman (Durham, City of Durham CDD), Valaria Brown (Durham, Housing for New Hope), Ashley VonHatten (Bal. of State, NCCEH), Andrea Carey (Data Center), Nicole Wilson (At large, Durham VA Medical Center), Kristen Armstrong (At large, UCCS), Mike Fliss (At large, UNC-Chapel Hill), Debra Vestal (At large, IFC), and Erika Walsh (At large, NC DHHS).

Bettie Teasley (At large, NCHFA) joined at 1:10 pm.

Members Absent: K'leigh Mayer (At large, NC 2-1-1), Donna Biederman (At large, Duke U School of Nursing), and Kat Weis (Orange, Orange County Hsg Dept.).

Also present: Katie Wiseman (ICA), Tonya Freeman (ICA), Nicole Purdy (NCCEH), Adriana Diaz (NCCEH), Emily Kraus (UNC Hospitals), and Melissa Bruno (MITRE) joined us.

Ray King (CDC), Alyson Goodman (CDC), Andy Gregorwicz (MITRE), Kaitlin Porter (MITRE), Kristen Mork (MITRE) and Sarah Armstrong (Duke Pediatrics) joined at 1:30 pm for the Childhood Obesity Data Initiative (CODI) presentation.

APPROVAL OF MINUTES

Presenter: Lloyd Schmeidler Formal Approval Needed? Goal: Share Info ☑Obtain Input ☑ Make Decisions Lloyd presented the minutes of the November 29, 2021, Advisory Board meeting and asked for their approval. Mike moved for their approval, and Ashley seconded the motion. The minutes were approved unanimously. TW0 **Supporting Material:** Draft November 27, 2021, minutes emailed and posted to NCCEH.org prior to the meeting.

HMIS@NCCEH UPDATES

1103011	Presenter: Andrea Carey						
Goal:	⊠ Share Info	⊠Obtain Input	☐ Make Decisions	Formal Approval Needed? □Yes ⊠No			
Andrea provided the following updates about the Data Center's work since our last meeting: • The Data Center has just ended the fourth quarter of its contract with ICA for system administration and Help Desk support. • In HMIS in 2021: • 89 Projects and 17 Agency Profiles were created. • Of the 89 new projects, 72 were Project Level Providers. • 143 New Users were added to the HMIS. A significant portion of these increases is due to the requirement that the new Emergency Housing Vouchers (EHV) program use the HMIS. HUD Reporting for the Data Center is in progress: • Longitudinal System Analysis (LSA) is due February 15th. • System Performance Measures (SPMs) are due February 28th. • Point in Time and Housing Inventory Count (PIT/HIC) are anticipated to be due April 30th. A new process known as Agency Check-Ins was initiated last quarter for agencies with projects pulled into any of the reports listed above. This allowed the Data Center to prepare the							
HMIS P	The Point in Ti Training late Ja Each A Report The deadline to Business Object A: NC HMIS CoCs help design an	me Count night wang and materials wang. Agency Admin has ting Tool (ART) In o complete reviews updates are contact and ask to join to	were produced for H s initial reports pulled boxes. ws and corrections is ming soon. he HMIS@NCCEH im	MIS participating agencies in middend for them in their Advanced see February 4 th .			
	Andrea The Eadmi In HN A signif Housing HUD Re A new pulled i Project address HMIS P ART & I HUD TA	Andrea provided the file. The Data Center has administration and file. In HMIS in 2021:	Andrea provided the following updates The Data Center has just ended the for administration and Help Desk support In HMIS in 2021: 89 Projects and 17 Agent for the 89 new properties of the 89 n	Andrea provided the following updates about the Data Cent The Data Center has just ended the fourth quarter of its condition and Help Desk support. In HMIS in 2021: 89 Projects and 17 Agency Profiles were created by Projects, 72 were Project Projects and 18 Projects and 19 Projects			

DHHS VACCINE RESEARCH PROJECT UPDATE

~	Presenters: Erika Ferguson Walsh and Andrea Carey						
FOUR	Goal: ☐ Share Info ☐ Obtain Input ☐ Make Decisions	Formal Approval Needed? ☐ Yes ☑ No					
	An in-depth review of the DDHS vaccine research project w updates. Erika will send notes to the NCCEH@HMIS Advisor updated.						
	Andrea added that one cause for delay can be attributed to						

identity) did not get translated into the report used for the vaccine data export until the December data was already in. Changes to the coding for the report were necessary but seem to be causing additional delays.

Mike asked Erika about the linkages between vaccine data and connecting HMIS data to DHHS data. Erika responded that the goal with HMIS data is that DHHS will be receiving new data each month and will run that against their Covid Vaccine Management System (CVMS) to review how North Carolina (NC) is doing in vaccinating its homeless population over time. Erika invited members to provide feedback on the vaccine research project.

Andrea asked for an update on DHHS's outreach to NC HMIS to include them in the project. Erika answered that a Memorandum of Agreement (MOA) has not been signed and the partnership has not moved forward yet.

Supporting Material:

• Erika will send out notes once the vaccine research data has been updated.

SYSTEM SHARING

Presenters: Childhood Obesity Data Initiative (CODI) team (rep. MITRE, CDC, UNC Hospitals, and Duke Health)

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Goal: ⊠ Share Info ⊠Obtain Input ⊠Make Decisions

Formal Approval Needed?

⊠ Yes □ No

Brian provided a review of the CODI project before members from the HMIS@NCCEH Advisory Board and CODI team introduced themselves to the group.

Sarah Armstrong (Duke Pediatrics/CODI Project Governance Efforts lead) presented an overview of CODI, which included:

- Why NC needs CODI:
 - To better understand the full picture of the diverse factors that affect North Carolinian's health
- What CODI does:
 - Aims to build an infrastructure in NC Triangle region that can be used to link an individual's data throughout the community into a single record
- How CODI data is used:
 - Researchers enables comparative effectiveness studies
 - Community partners provides data on health improvements associated with interventions
 - Policymakers increases understanding of community chronic disease prevalence
 - Clinical partners increases awareness of community-based programs for patient referral
- Potential benefits for participating in CODI:
 - The single records created can be used to help participating organizations answer questions related to health, community programs, local policies, and other topics of interest to local collaborators.
- Potential partners and the project management team:
 - \circ $\,$ CODI@NC will include multiple collaborators from clinical and community-based organizations.
 - Different levels of partnerships

Andy Gregorwicz (MITRE/CODI Technical lead) presented an overview of the technical aspects of CODI, which included:

- How CODI works:
 - Functions as a distributed data network
 - Each organization's data stays secure behind its firewall.

FIVE

o In NC the Data Coordinating Center is Duke Health.

Mike asked Andy if anything is lost in the privacy-preserving linkages, since the linkages cannot be hand reviewed and how CODI validated good quality linkages. Andy pointed to Colorado (CO), where CODI has been implemented, noting that at a high level in CO, CODI has been looking at concordance between values such as sex assigned at birth and date of birth to investigate the quality of linkages they are establishing between participating organizations. He added that there has been some limited investigation done by organizations, but it is a very hard problem to address.

Brian reported that he and Andrea have been joining workgroup meetings for the governance body of CODI, noting that the group aligns with HMIS@NCCEH's governance as well.

Mike asked if the project costs anything and how it plays out in practice. Ray (CDC/CODI Project lead) answered that CODI is in discussions to see how the project will be operationalized in NC for the pilot and beyond. Initially the Centers for Disease Control (CDC) is funding the project. Brian added that the CDC's funding goes to March 2023. Part of the CODI governance body's work over the next few months is to think about the sustainability of the project long-term, including finances.

Kaitlin (MITRE/COID Project lead) added that the CODI team is hoping to have their longitudinal data set done by end of calendar year 2022. They will use this to find what questions are a priority and are hoping to have a master data use agreement done by the fall of 2022.

Lloyd asked if there are options for individual CoCs to decide about participation in CODI or for the HMIS@NCCEH Advisory Board to invite HMIS participating agencies to specifically agree to participate in CODI. Brian responded that CODI's aim is for the HMIS@NCCEH Advisory Board to consider whether the entire HMIS@NCCEH implementation participates. He noted that under HMIS@NCCEH's governance, individual CoCs cannot opt-out of CODI if it is approved by the HMIS@NCCEH Advisory Board.

Brian also pointed out that approval by the HMIS@NCCEH Advisory Board would allow member CoCs to use its implementation data, but every partner can opt-in or out of an individual query generated by CODI.

Mike asked if a researcher could request data and submit it to the project even if there isn't a formal DHHS participation agreement in perpetuity. Kristen (MITRE/CODI Data lead) answered that Privacy-Preserving Record Linkage (PPRL) is done as an offline process, meaning that before queries can be answered all Personally Identifying Information (PII) is removed.

Brian stated that participation in CODI can help the HMIS@NCCEH implementation get statewide homelessness data.

Hanaleah added that CODI also could support the HMIS@NCCEH implementation by increasing its ability to analyze the data in more complex ways, given that the data will already be cleaned and organized in the system, which has been a barrier to data analysis up to now.

Mike commented that linking across implementations to ask questions across the state is a great opportunity, even if there weren't other high-value data sources.

Rachel expressed support for participation in CODI but voiced concerns about how the CODI project's evolution will be filtered down to the participants for consenting purposes. Andrea responded that there is already consent from HMIS@NCCEH's governance with the Release of Information and Data Privacy Agreement, so the evolution falls in line with existing policies.

Rachel also asked if the HMIS@NCCEH Advisory Board could expect NCCEH to update any privacy policies or communications to participants. Brian answered that participation in CODI

does not require changes to the HMIS@NCCEH implementation's governance.

Erika, Hanaleah, and Mike expressed support in participating in CODI.

Hanaleah noted that participating CoCs should consider making their default practice to review every CODI query at the beginning of the CODI partnership, and that over time the CoCs might feel more comfortable in taking a broader approval approach; Rachel agreed. Kaitlin (MITRE/CODI Project lead)) responded that Emily (UNC Hospitals/CODI) will be working with the HMIS@NCCEH Advisory Board's attorney to make sure the the agreement is approved.

Lloyd added his support for the initiative, stating that it would be good for the HMIS@NCCEH Advisory Board to educate their local CoCs about how CODI will be working and its potential impacts. He noted that one long-term benefit may be to develop more clarity on the economic and social impacts of homelessness in NC.

Lloyd made a motion to approve the HMIS@NCCEH implementation joining CODI. Rachel seconded the motion. The motion to join CODI was approved unanimously.

Supporting Material:

• CODI presentation slides emailed and posted to NCCEH.org following the meeting.

2021-2022 GOALS UPDATE

	Presen	ter: Brian Alexa	Alexander				
	Goal:	Share Info	⊠Obtain Input	☐ Make Decisions	Formal Approval Needed?		
					□Yes	⊠ No	
FIVE	The 2021-2022 goal setting discussion was tabled for the next full HMIS@NCCEH Advisory Board meeting on March 28, 2022.						
	Suppo	rting Material:					
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The meeting adjourned at 2:50 PM.

Respectfully submitted,

Lloyd Schmeidler, Secretary with staff support from Adriana Diaz

Next Executive Committee Meeting: February 28, 2022, from 1-2 pm

Next Full HMIS Advisory Board Meeting: Monday, March 28, 2022, from 1-3 PM