Durham HMIS User’s Meeting
April 2018

The Data Center at NCCEH
Welcome

1. Introductions
2. Disabling Condition
3. System Performance Measures (SPM)
4. SPM Data Quality
5. Mediware updates
6. Discussion
7. Reminders
8. Q&A
Collecting + Entering Disability Data

Improving NC HMIS Data Entry
We have to get disability data right in HMIS!

**Learn about the people in our system**
What does our homeless population look like?
What types of disabilities do they have?
Helps identify chronically homeless clients

**Improve our system to better serve clients**
Connect eligible clients to disability benefits
What types of programs and/or services do they need?
Are these programs/services available in our community?

**Report out about our system**
Federal, State, Local, Agency
What is a disabling condition?

1. A physical, mental, emotional impairment, including an impairment caused by alcohol or drug abuse, PTSD, brain injury or chronic health issue that:
   - Is expected to be of long and indefinite duration, and
   - Substantially limits the client's ability to live on their own

2. A developmental disability

3. AIDS or HIV
This is important!

Disabling Condition has 3 criteria

**HUD**: If a client meets at least 1 of the 3 criteria, then YES, the client has a disabling condition
What does HUD want to know about disability?

1. Does the client have a disabling condition?
2. What type of disabling condition does the client have?
   a. Is the condition expected to be of long-continued and indefinite duration?
   b. Does the condition substantially impair the client’s ability to live independently?

Note- Only projects that receive funding with eligibility criteria that require documentation of the disabling condition should require documentation.
What is documentation+ what counts?

Documentation = Evidence of disability

<table>
<thead>
<tr>
<th>Source</th>
<th>Evidence needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed professional</td>
<td>Written document to verify disability and certify that the disability is expected to be long-continuing or of indefinite duration and substantially impedes the individual’s ability to live independently; Professional must be licensed by state of NC to diagnose and treat the disability</td>
</tr>
<tr>
<td>Social Security Administration</td>
<td>Written verification of disability or the receipt of a disability check (SSDI)</td>
</tr>
<tr>
<td>VA (or other federal agency)</td>
<td>Receipt of a disability check</td>
</tr>
<tr>
<td>HUD</td>
<td>Other approved documentation</td>
</tr>
<tr>
<td>Intake staff</td>
<td>Written observation of disability that, no later than 45 days of the application for assistance is confirmed and accompanied by evidence (as listed above)</td>
</tr>
</tbody>
</table>
Before we go further, let’s check in

Do you have any questions?

**Review Questions**
Why is HMIS disability data important?

Can you define disabling condition?

How many criteria does a client need to meet to be identified as having a disabling condition?
Disability Data in NC HMIS
Disability data is entered in 3 places

- Project Entry
- Interim
  - Update
  - Annual Assessment
- Project Exit
Disability questions in HMIS - 2 parts

**Part 1**
A general question

**Part 2**
The disability sub-assessment
Part 1 is called the Gateway Question

Does the client have a disabling condition?

Responses:
- Yes
- No
- Client doesn’t know
- Client refused
- Data not collected
The sub-assessment collects detailed disability data

<table>
<thead>
<tr>
<th>Disabilities</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disability Type</strong></td>
<td>-Select- ▼</td>
</tr>
<tr>
<td><strong>Disability determination</strong></td>
<td>-Select- ▼</td>
</tr>
<tr>
<td>If Yes, Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently</td>
<td>-Select- ▼</td>
</tr>
<tr>
<td><strong>Start Date</strong></td>
<td>04 / 14 / 2018</td>
</tr>
</tbody>
</table>
This is where things get a bit weird...

Remember our criteria for disabling condition?

In order to collect the most accurate data for Part 1, we need to ask the criteria questions in Part 2.
When to answer “Yes”

Only answer yes here if:

- The client’s disability type fits within HUD’s disabling condition definition.
- The client answers yes here (unless disability type is Developmental or HIV/AIDS).
Working with Clients
Collecting disability data in 4 steps!

1. Discuss disability definition with the client (3 criteria)
2. Work with the client to determine if they meet disability criteria
3. Ask if the disability has been documented or can be verified
4. Ask the client if they are currently receiving services or treatment for the disability
I would like to ask you a few questions about disabling conditions. Is that ok?

Yes.
A disabling condition is an impairment, brain injury, or chronic health condition that is expected to last indefinitely and substantially limit a person’s ability to live on their own.
Explaining disability type

When it comes to disabling conditions, we view them in these categories: Physical, Chronic Health Condition, HIV/AIDS, Developmental, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug Abuse, and Mental Health Problem.
Gather information about disability type

Do you have any conditions that fit into any of the disability categories I listed?

Yes- I have a Mental Health Problem
Ask related criteria questions

Thank you for sharing that with me. Is your Mental Health Problem expected to be of long and indefinite duration and does it impair your ability to live independently?

Yes, it is indefinite and impairs my ability to live independently.
Request documentation of disability

Has someone like a doctor or other professional verified that you have this disability? If so, is there a document you can share for our records?

No, it has not been documented.
Ask about treatment or services

Are you currently receiving treatment or services for your Mental Health Issue?

No, but I want to.
## What did we learn from the client?

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability Type</td>
<td>Mental Health Problem</td>
</tr>
<tr>
<td>Expected to be of long duration and indefinite and substantially impair ability to live independently?</td>
<td>YES</td>
</tr>
<tr>
<td>Does the client have a disabling condition?</td>
<td>YES (based on the responses above)</td>
</tr>
<tr>
<td>Documentation of disability and severity on file?</td>
<td>NO (separate from disability determination)</td>
</tr>
<tr>
<td>Currently receiving services of treatment?</td>
<td>YES</td>
</tr>
</tbody>
</table>
HMIS Disability Data Entry

Based on scenario from previous section
Indicate client has a disability in HMIS

Does the client have a disabling condition?

- Select -
- Select -
Yes (HUD)
No (HUD)
Client doesn't know (HUD)
Client refused (HUD)
Data not collected (HUD)
Select type of disability in HMIS

1. Click on "Disability Type *" and select "Mental Health Problem (HUD)"
Enter Start Date = Date information collected

If we collected the info today, we should set the start date to today’s date
Enter disability determination in HMIS

If the client has this disability type, set this to “Yes”

The answer here should match response to the gateway question
Save the disability data in HMIS

Click this button if client has more than one disability
HUD Verification
HUD verification matters

<table>
<thead>
<tr>
<th>Disability Type*</th>
<th>Disability determination*</th>
<th>Start Date*</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Problem (HUD)</td>
<td>Yes (HUD)</td>
<td>04/14/2018</td>
<td>04/14/2019</td>
</tr>
</tbody>
</table>

Showing 1-1 of 1
# HUD Verification Alerters- green is good

<table>
<thead>
<tr>
<th>Alerter</th>
<th>HUD Verification Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1.png" alt="Alert Icon" /></td>
<td>Incomplete</td>
</tr>
<tr>
<td><img src="image2.png" alt="Approve Icon" /></td>
<td>Complete</td>
</tr>
</tbody>
</table>
Complete HUD Verification (determination=yes)

We were able to determine that our client had a disabling mental health problem

<table>
<thead>
<tr>
<th>Disability Type</th>
<th>Yes (HUD)</th>
<th>No (HUD)</th>
<th>Client doesn't know (HUD)</th>
<th>Client refused (HUD)</th>
<th>Data not collected (HUD)</th>
<th>Incomplete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic Health Condition (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV/AIDS (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Developmental (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol Abuse (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug Abuse (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both Alcohol and Drug Abuse (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health Problem (HUD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Already filled in
Disability Data quality
Two of the most common errors
Potential disability data entry errors - Missing

Selecting “Yes” to indicate a client has a disability but no disabilities are entered
Potential disability data entry errors- Conflict

Selecting “No” to indicate that a client does not have a disability but adding a disability type in the sub-assessment
Locate these errors using the 0640 report

The 0640 HUD Data Quality Framework is located in ART

<table>
<thead>
<tr>
<th>Q3. Universal Data Elements</th>
<th>Error Count</th>
<th>% of Error Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veteran Status (3.7)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Project Entry Date (3.10)</td>
<td>1</td>
<td>0.23%</td>
</tr>
<tr>
<td>Relationship to Head of Household (3.15)</td>
<td>7</td>
<td>1.62%</td>
</tr>
<tr>
<td>Client Location (3.16)</td>
<td>2</td>
<td>0.65%</td>
</tr>
<tr>
<td>Disabling Condition (3.8)</td>
<td>8</td>
<td>1.86%</td>
</tr>
<tr>
<td>Destination (3.12)</td>
<td>88</td>
<td>36.67%</td>
</tr>
</tbody>
</table>

Missing and inconsistent data will be aggregated here. Another tab will detail who these clients are.
Or locate these errors using the CoC-APR and ESG-CAPER reports

Dashboard reports can be found in the “Reports” menu on the left hand side

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Client Doesn’t Know/Client Refused</th>
<th>Information Missing</th>
<th>Data Issues</th>
<th>% of Error Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name (3.1)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>SSN (3.2)</td>
<td>13</td>
<td>5</td>
<td>7</td>
<td>11%</td>
</tr>
<tr>
<td>Date of Birth (3.3)</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1%</td>
</tr>
<tr>
<td>Race (3.4)</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>Ethnicity (3.5)</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Gender (3.6)</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Overall Score</td>
<td></td>
<td></td>
<td></td>
<td>12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Error Count</th>
<th>% of Error Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veteran Status (3.7)</td>
<td>2</td>
<td>1%</td>
</tr>
<tr>
<td>Project Start Date (3.10)</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Relationship to Head of Household (3.15)</td>
<td>2</td>
<td>1%</td>
</tr>
<tr>
<td>Client Location (3.16)</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Disability Condition (3.8)</td>
<td>2</td>
<td>1%</td>
</tr>
</tbody>
</table>

Missing and inconsistent data will be aggregated here. Another tab will detail who these clients are
System Level Performance
Homelessness should be:

**Rare**
- Prevent or divert new episodes of homelessness
- Access resources without a shelter stay

**Brief**
- Reduce length of time while homeless
- Reduce program length of stays
- Increase exits to permanent housing

**Non-recurring**
- Reduce returns to homelessness
- Focus on housing stability
- Create access to resources without another shelter stay
7 measures to gauge impact

Help communities view their progress community towards preventing and ending homelessness

The measures are interrelated and provide a more complete picture of system performance

Identify areas for improvement, needs, gaps

Measure and improve data quality for greater confidence
SPM data is pulled from 2 places

HMIS

Housing Inventory Count (HIC)
What HMIS client data is included?

October 1, 2014 to September 30, 2017 (36 months)

Any person who entered SO, ES, SH, TH, RRH and/or PSH during the reporting period

Data are reported for individuals and person in families
SPM data quality
Your HMIS data matters!
Important data elements for SPM

Entry Date
Date of Birth
Relationship to Head of Household
Client Location
Prior Residence
Length of stay in previous place
Approximate start date of homelessness
Number of times homeless in past 3 years
Number of months homeless in past 3 years
Income
Housing Move-in Date
Annual Assessment Date
Exit Date
Exit Destination
Data quality impacts the SPMs

**Coverage**
Include as many homeless service providers in the community in HMIS as possible

**Utilization**
Bed utilization rates must be between 65% to 105%

**Data Quality**
- Data entry is timely
- Low rate of missing data
- Data reflects what is accurate
- Discrepancies have been identified and addressed
Data **must** be cleaned prior to submission

The next slides will show the most common red flags and how to resolve them in ServicePoint

- Missing Data
- Incomplete or Conflicting Sub-assessments
- Unexited Clients
## Missing data

<table>
<thead>
<tr>
<th>Error information</th>
<th>UDEs were not pulled into HMIS report at client entry, interim and/or exit</th>
</tr>
</thead>
</table>
| **How do I find this error?** | Run the 0640 Data Quality Framework report in ART  
- Review the client detail tab  
Run the APR or CAPER report on Dashboard  
- Review the error counts |
### Missing data

<table>
<thead>
<tr>
<th>How do I fix this error?</th>
<th>Review client file for information</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Building" /> Round Arrow 1</td>
<td>If information is in file, enter into HMIS using EDA and Backdate mode</td>
</tr>
<tr>
<td><img src="image" alt="Warning" /> Round Arrow 2</td>
<td>Remember: Missing data is ALWAYS better than inaccurate data</td>
</tr>
</tbody>
</table>

Call the Data Center for SSN entry
## Incomplete or Conflicting Sub-assessments

<table>
<thead>
<tr>
<th>Error information</th>
<th>Incomplete HUD verification on disability, income, benefits and/or health insurance sub assessments</th>
</tr>
</thead>
</table>
| **How do I find this error?** | Run the 0252 Data Completeness Report Card EE in ART  
- Review the client detail tab  
Run the APR or CAPER report on Dashboard  
- Review the error counts |
| **How do I fix this error?** | Review client file for documents verifying disability, income, benefits and/or health insurance  
Remember: Missing data is ALWAYS better than inaccurate data |
Update and annual Assessment

PART II: SUB-ASSESSMENTS
**HMIS Data Collection Stages**

- **Record Creation**: When client record is created
- **Project Start**: At every project start
- **Update**: At multiple points during project enrollment
- **Annual Review**: Recorded no more than 30 days +/- the anniversary date of the HoH’s Project Start Date
- **Project Exit**: At every project exit
- **Post Exit**: Follow-up after project exit

*All Permanent Housing projects must record Move-in dates as an Interim Review – Update*
How to Change Sub-assessments

Disability, Health Insurance, Income and Non-Cash Benefits can be changed in

- Interim Updates
- Interim Annual Assessments
- Exit Assessments
- Post-Exit Follow-ups
How to Change Sub-assessments Reference Table

<table>
<thead>
<tr>
<th>Previous Response</th>
<th>Change or Edit at Update</th>
<th>Action (always check EDA and Backdate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gateway = No</td>
<td>Gateway = Yes</td>
<td>Change dropdown to Yes</td>
</tr>
<tr>
<td>Gateway = Yes</td>
<td>Gateway = No</td>
<td>Change dropdown to No</td>
</tr>
<tr>
<td>Type/Source = No</td>
<td>Type/Source = Yes</td>
<td>Do not edit previous Type/Source. Add new Type/Source as of the Update</td>
</tr>
<tr>
<td>Type/Source = Yes</td>
<td>Type/Source = Yes</td>
<td>Edit previous Type/Source and set end-date for day before the Update. Then Add new Type/Source as of the Update</td>
</tr>
<tr>
<td>Type/Source = Yes</td>
<td>Type/Source = No</td>
<td>Edit previous Type/Source and set end-date for day before the Update. Then use HUD Verification to set Type/Source to No</td>
</tr>
</tbody>
</table>
How to Change Sub-assessments

**Example A**
Wilson Smith has no income at project start Oct 31\textsuperscript{st}, but has $734 SSI income at your meeting on Nov 10\textsuperscript{th}.

**Steps to Update**

1. Use Enter Data As for the right project and Backdate to 11/10/17
2. Go to Wilson’s Entry/Exit tab and Add an Interim Update
3. Update the Gateway question to Yes
How to Change Sub-assessments

4. Click Add for a new SSI response

5. Complete Income Source information
6. Now check that the Gateway, Sources and HUD Verification all align and are correct.
Example B
John Smith is receiving $734 SSI income at project start Oct 31st, but his SSI income has increased to $786 at your meeting on Nov 10th.

Steps to Update
1. Use Enter Data As for the right project and Backdate to 11/10/17
2. Go to John’s Entry/Exit tab and Add an Interim Update
3. Find the SSI Income Source and click the pencil icon to edit
How to Change Sub-assessments

4. Set the end-date to the day before the Backdate mode, Nov 9th

5. Click Add for a new SSI response
How to Change Sub-assessments

6. Complete Income Source information

![Image of monthly income input form with details for monthly amount, source of income, receiving income source, start date, and end date.]
How to Change Sub-assessments

7. Now check that the Gateway, Sources and HUD Verification all align and are correct

<table>
<thead>
<tr>
<th>Monthly Amount</th>
<th>Source of Income</th>
<th>Receiving Income Source?</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>USS786.00</td>
<td>SSI (HUD)</td>
<td>Yes</td>
<td>11/10/2017</td>
<td></td>
</tr>
<tr>
<td>Other (HUD)</td>
<td>No</td>
<td>10/31/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worker's Compensation (HUD)</td>
<td>No</td>
<td>10/31/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VA Non-Service Connected Disability Pension (HUD)</td>
<td>No</td>
<td>10/31/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VA Service Connected Disability Compensation (HUD)</td>
<td>No</td>
<td>10/31/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Error information</td>
<td>Missing project exit date for clients no longer receiving services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td>------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How do I find this error?</td>
<td>Run the 0216 Unexited Clients Exceeding Max Length of Stay report</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Run the APR or CAPER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Review Question 22 Length of Participation (in days)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How do I fix this error?</td>
<td>Review client file, consult with other staff to get information about date of client exit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Exit client from project using Enter Data As and Backdate mode</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Overlap in different projects

Overlapping start dates
- Among different projects

<table>
<thead>
<tr>
<th>Program</th>
<th>Type</th>
<th>Entry Date</th>
<th>Exit Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wisteria Way Housing- Lee County -TH (5551)</td>
<td>HUD</td>
<td>08/04/2017</td>
<td>08/07/2017</td>
</tr>
<tr>
<td>Heading Home Housing - Rowan County - Emergency Shelter - State ESG (7124)</td>
<td>HUD</td>
<td>08/01/2017</td>
<td>08/06/2017</td>
</tr>
</tbody>
</table>

Showing 1-2 of 2
Where can I find the 0640 Report?
Schedule the 0640 Report
0640 Report Prompts

**ART Report**

**Prompts**

*Fill out each of the prompts below*

- **Select Provider(s):**
- Leave blank
- **Select Provider CoC Code(s):**
- Leave blank
- **Select Reporting Group Name:**
- **EDA Provider**
- **Enter effective date**
- **Enter Start Date:**
- **Enter End Date PLUS 1 Day:**

**Select Provider(s):**

Optional

Select

*Select your specific project(s)*

*Select your specific project or leave as default*

Enter your End date + 1

Enter your Start date

Enter your End date + 1
Mediware update
Software Update

AIRS codes updated

ART Reports getting updates:
• 0640 – HUD Data Quality Framework report
• 0701 – Exits to Permanent Housing with Return to Homelessness, Metric 2
• 0706 – Permanent Housing Placement-Retention, Metric 7
• 0252 – Data Completeness Report (EE)
What would users like to see in new NCCEH training?

Are there topics you'd like us to focus on?

What is working right now?

What is not working?
NCCEH Reminders
HMIS @NCCEH Update

A new Homeless Management Information System at the North Carolina Coalition to End Homelessness will be launched in early June 2018!

This new HMIS is being created to better meet the needs identified by NCCEH and these CoCs.

What Should I Expect?
• New and improved training, workflows and forms
• A new ServicePoint website URL

What Should I Do Now?
• Keep entering data into NCHMIS until notified to stop – we’ll notify in June.
• Stay informed! We’ll send out communication with FAQs and more info soon.
• Ask us questions! Contact Ben Bradley, NCCEH Project Specialist (Ben@ncceh.org) if you have any questions. If needed, he’ll schedule time for you to speak with Denise Neunaber, NCCEH Executive Director.
<table>
<thead>
<tr>
<th>Due</th>
<th>Report Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>March - April</td>
<td>PIT/HIC</td>
</tr>
<tr>
<td>April - May</td>
<td>System Performance Measures</td>
</tr>
<tr>
<td>April 26</td>
<td>Entry/Exit Training 1 pm - 4 pm in Durham</td>
</tr>
<tr>
<td>April 30-May 1</td>
<td>Bringing it Home: Ending Homelessness in NC Conference</td>
</tr>
<tr>
<td>May 24</td>
<td>Next Durham HMIS Users Meeting 9 am – 10:30 am</td>
</tr>
<tr>
<td>May 7-May 25</td>
<td>RHY Grantee Submission</td>
</tr>
<tr>
<td>June 28</td>
<td>Durham HMIS Users Meeting</td>
</tr>
</tbody>
</table>
Data security depends on all of us

- Do not leave your computer logged in & unattended
- Do not share passwords
- Alert us when staff with access to HMIS leave your agency
ncceh.org/hmis
access local support for Balance of State, Wake, Durham, & Orange CoCs

919.410.6997 or hmis@ncceh.org
helpdesk for local support