SACRAMENTO STEPS FORWARD

Ending Homelessness. Starting Fresh.

CoC Advisory Board Agenda
November 13, 2019 ‖ **8:10 AM – 9:40 AM**
SETA, 925 Del Paso Blvd., Sacramento, CA 95815 – Sequoia Room

I.	**Welcome & Introductions:** Sarah Bontrager, Chair			
II.	**Review and Approval of October 9 Minutes:** Emily Halcon, Secretary			
III.	**Chair's Report**			
IV.	**CEO's Report:** Lisa Bates			
V.	**Consent-Action: HMIS Data Quality Plan and HMIS Privacy and Security Plan** - Review the Data Quality and Privacy & Security Updates materials prior to meeting.			
VI.	**New Business**			
A.	**System Performance Committee Recruitment Updates**	- Presenter(s): Noel Kammermann, SPC Co-Chair & Emily Halcon	8:15 AM (5 minutes)	Information
B.	**2019 PIT Committee Recommendations**	- Presenter(s): Noel Kammermann, Committee Co-Chair	8:20 AM (35 minutes)	Action
C.	**HHAP Discussion**	- Presenter(s): Lisa Bates	8:55 AM (30 minutes)	Discussion
D.	**CE Assessment/Re-Design Update**	Presenter(s): Greg Schuelke, SSF CoC Program Manager and Joe Concannon, SSF CES Manager	9:25 AM (10 minutes)	Information

E. Biannual CoC Meeting Announcement	Presenter(s): Sarah Bontrager	9:35 AM (5 minutes)	Information
VI. Announcements			
VII. Meeting Adjourned			

NEW Consent Items for Review Prior to Meeting
Please note that this is a new section of the agenda. The purpose of a consent-action is to eliminate the time spent during meetings for Q&A for low-discussion action items. Instead, we ask that you prepare for immediate action by thoroughly reviewing materials prior to the meeting with the intention of handling Q&A before meetings via email.
- Data Quality & Privacy and Security Updates

Receive & File Items
- Follow Ups Report
- Annual Business Cycle Calendar

Upcoming Committee Meetings:
– Weekly on Wednesdays Youth Action Board
– 11/13 Veterans Collaborative (Case Conferencing only)
– TBA Combined CES Evaluation and CES Committees
– 11/20 Governance Committee
– TBA Executive Committee
– 12/4 Homeless Youth Taskforce
– 12/4 CoC Board
– 12/11 Veterans Collaborative (Case Conferencing only)
– 1/28 Performance Review Committee
– 1/9 HMIS & Data Committee

Next Meeting: December 11, 2019

Please note that today's meeting is being recorded and the digital file will be available upon request.

CoC Board Meeting

Wednesday, October 9, 2019 | 8:10 AM – 10:40 AM
925 Del Paso Boulevard, Suite 200, Sacramento, CA 95815 | Sequoia Room

Attendance:

Member	Area of Representation	Present
Alexis Bernard	Mental Health Service Orgnanization	Yes
Amani Sawires Rapaski	Substance Abuse	No
Angela Upshaw	Veterans	Yes
April Wick	People with Disabilities	No
Christie M. Gonzales	Mental Health Service Organization	Yes
Cindy Cavanaugh	County of Sacramento	Yes
Ct. Dan Monk	Law Enforcement – City	No
Emily Halcon	City of Sacramento	Yes
Erin Johansen	Mental Health	Yes
Jameson Parker	Business Community & Street Outreach	Yes
John Foley	Homeless Services Provider	Yes
John Kraintz	Lived Experience	Yes
Julie Davis-Jaffe	Employment Development	Yes
Lt. Julie Pederson	Law Enforcement – County	No
Lashanda McCauley	Lived Experience – Family	No
MaryLiz Paulson	Housing Authority	Yes
Mike Jaske	Faith Community Advocate	Yes
Noel Kammermann	Local Homeless Coalition/Network	Yes
Peter Beilenson	Mental Health – County	No
Sarah Bontrager	City of Elk Grove	Yes
Stefan Heisler	City of Rancho Cordova	Yes
Stephanie Cotter	Ciyt of Citrus Heights	Yes

Staff	Title
Lisa Bates	SSF Chief Executive Officer
Kate Casarino	SSF CoC & Contracts Coordinator
Michele Watts	SSF Chief of Programs
Greg Schuelke	SSF CoC Program Manager
Ya-Yin Isle	SSF Chief Strategic Initiatives Officer

I. Call to Order & Welcome: Sarah Bontrager, Chair		
Sarah Bontrager, Chair, called the meeting to order at 8:19 AM.		
II. Minutes	Presenter: Emily Halcon, Secretary	Information
Motion to approve July 10, 2019 meeting minutes as presented: 1st – Jameson Parker, 2nd – Erin Johansen. MSC.		
III. Chairs Report	Presenter: Sarah Bontrager	Information
The SSF Board is looking for new office location as the current one is under new ownership and their view of the lease is different. 2nd round of CESH award has been received. FY19 NOFA application was officially submitted. The Governance Committee work will be how to stand up the revised charter as approved at the last meeting.		
IV. SSF CEO's Report	Presenter: Lisa Bates	Information
SSF office lease will end in June 2020. The building is no longer a non-profit resource center and amenities have been taken away. SSF is actively working on the scope of work for CESH 1 and there will be plenty of work to be done without an established Systems Committee.		
V. Item A: CoC Board Response to Grand Jury Findings	Presenter: Sarah Bontrager	Action
Action: To approve the CoC Board response to Grand Jury findings: 1st – Erin Johansen, 2nd Jameson Parker. MSC		
Item B: Sacramento Homeless Service Response Dashboard Input Process	Presenter: Ya-yin Isle, SSF Strategic Initiatives Officer	Action
Action: Approve the Dashboard input process as presented: 1st Emily Halcon, 2nd Jameson Parker. MSC.		
Item C: CoC Board Committees - **Member Survey** - **System Perofrmance Committee Formation**	Presenter: Michele Watts	Information
CoC Board members are required to join a committee as part of the revised governance charter. CoC Board members will participate in an online survey to indicate what committees they are interested in joining, but will have to fill out a declaration of interest when the public call for nominations is released. The goal is to have all committees begin meeting in January under the formal structure as indicated in the governance charter.		
VI. Announcements	Presenter: Sarah Bontrager	Information
- John Kraintz: What is being done about making new housing in the community? - October 22nd Council members will have a conversation about encampment.		
X. Adjourn		
The meeting was adjourned at 9:40 AM.		

SACRAMENTO
STEPS FORWARD

Ending Homelessness. Starting Fresh.

TO: CoC Board

FROM: 2019 Point-in-Time Count Committee

CC: SSF

DATE: November 13, 2019

RE: PIT Committee Recommendations- Action Item

Summary
The memo below outlines the background, process, and a series of recommendations for the next Point-in-Time (PIT) Count from the 2019 PIT Committee for the CoC Board's approval.

Background
As you know, HUD mandates that CoCs conduct a PIT count of people experiencing unsheltered homelessness no less than biennially. Every PIT count is a vast undertaking involving a variety of partners as well as Sacramento Steps Forward (SSF) staff and consultants. To successfully execute each count, SSF conducts widespread outreach and engagement activities, convenes numerous ad hoc stakeholder input sessions to gather information and plan for improvements, and conducts frequent staff-consultant workgroup meetings. In 2019, the CoC Board also convened a PIT Committee to formalize its engagement with what has historically been a primarily staff-driven project.

Because the 2019 PIT Committee was formed in January, many elements of the count had already been contracted for, launched or implemented, or agreed upon, meaning most points of engagement for the committee had already passed. Therefore, staff recommended and the board agreed that the 2019 PIT Committee would focus its efforts on assessing and debriefing existing practices and defining the role and scope of future committees, to be implemented beginning with the 2021 PIT Committee.

The CoC Board approved the membership slate of the ad hoc 2019 PIT Committee on January 9th. The roster is as follows:

Member	Organization
David Heitsman	Sacramento LGBT Center
Jesse Archer*	Sacramento LGBT Center
Bridget Alexander	Waking the Village
Benjamin Uhlenhop	Next Move
Jeff Tardaguila*	Community Member
Stefan Heisler	City of Rancho Cordova
Noel Kammermann*	Loaves & Fishes
Julie Pederson	Sacramento Sheriff's Department
Daniel Monk	Sacramento City Police Department

* Co-Chairs

Process
The 2019 PIT Committee met from February to September, with development of a work plan its first order of business. The work plan is attached (attachment 1). Members identified three main areas of focus:
- Research Design- Methodology & Reporting
- Volunteer Coordination
- Final PIT Report

The committee worked closely with PIT research consultants from CSUS Institute for Social Research and SSF staff to debrief 2019 count processes. For each main area of focus, consultants and staff made detailed presentations, with members asking questions and providing input for the next count. These presentations and discussions were documented in memos and meeting minutes and informed the development of a 2021 PIT Count timeline. The committee's last meeting was held in September. In October, the staff and co-chairs collaborated to draft this recommendations memo, which was then circulated to the full committee membership via email for review and feedback.

Recommendations
The 2019 PIT Committee proposes the following recommendations for approval by the CoC Board:
- Adopt the 2021 PIT Count Timeline
- Establish a standing PIT Committee or Subcommittee
- Provide Reports and Minutes of the 2019 PIT Committee to the new, standing committee/subcommittee for consideration
- Explore the feasibility of conducting the PIT Count annually

2021 PIT Count Timeline
Over the course of eight months, the PIT Committee digested a great deal of information and generated extensive feedback and ideas for future counts. Much of this input has been incorporated into the attached 2021 PIT Count timeline (attachment 2), recommended for adoption by the CoC Board. The timeline consists of two tracks, research design- methodology and reporting and volunteer coordination, beginning with the release of RFPs to identify 2021 consultants and ending with the publication of the 2021 PIT Report. The timeline launches 2021 activities in early 2020, much earlier than in previous cycles, and calls out the touchpoints for CoC and other stakeholder engagement throughout the process.

Standing PIT Committee/Subcommittee
2019 PIT Committee members agree a standing committee or subcommittee is necessary moving forward to oversee implementation of the new proposed timeline. The meeting schedule can vary based on the amount of work needed, shifting from quarterly meetings further out from the count to monthly meetings closer to the count. The System Performance Committee established in the 2019 Governance Charter is a logical committee under which a PIT Subcommittee could be placed.

2019 PIT Committee Input to New Committee
The 2019 PIT Committee members provided a great deal of input for consideration in the next count. However, members did not deliberate on every item or formalize its input into specific recommendations for implementation in 2021, aside from the timeline proposed above. Although not in the form of formal recommendations, the committee's extensive feedback has been documenting in reports and meeting minutes, materials that should be provided to the next committee for consideration as it implements the 2021 timeline.

Annual PIT Count
In its efforts debriefing the 2019 PIT Count, the committee gained a full understanding of the work required for the biennial unsheltered count requirements. While members recognize the cost and effort are significant, the committee recommends the CoC conduct a full count every year if funding and other resources can be identified to support it.

Recommended Action: Approve the 2019 PIT Committee recommendations for the 2021 PIT Count, including (1) timeline; (2) standing sub/committee formation; (3) transmittal of 2019 input to the new sub/committee for consideration; and (4) annual PIT count .

2019 PIT Committee Work Plan 10/11/19 Update
Approved 4/22/19

Component/Activities	Start Date	End Date	Status	Notes
Research Design - Methodology & Reporting				
Product/Deliverable: Recommendations on future PIT processes related to reseach design by the October 2019 CoC Board meeting.				
Debrief targeted activities to count TAY and develop recommendations for the next PIT. Also develop recommendations for applying TAY approach to counting families with children.	10/11/19	10/21/19		collected input via email
PIT Survey: Review 2019 survey and develop a community process for adding non-HUD-mandated questions for the next PIT.	8/26/19	9/23/19		
Mapping: Debrief the 2019 mapping process, including a review of outreach efforts and participating agencies to develop recommendations the next PIT.	9/23/19	9/23/19		
Key Research Design Questions & Considerations:				
Should the Sacramento CoC conduct a full PIT that includes an unsheltered count annually?	7/22/19	9/23/19		
Can we use drones to do any part of the unsheltered count (pre-deployment mapping and/or actual counting the nights of)?	7/22/19	9/23/19		
Volunteer Coordination				
Product/Deliverable:Recommendations on future PIT processes related to volunteer coordination by the October 2019 CoC Board meeting.				
Debrief the 2019 volunteer recruitment efforts and results and develop recommendations for the next PIT.	4/22/19	5/20/19		
Review the 2019 volunteer training curriculum and develop recommendations for the next PIT.	4/22/19	5/20/19		

Review the volunteer survey results and develop recommendations for the next PIT.	4/22/19	5/20/19		Results reviewed 4/22/19
Key Volunteer Coordination Questions & Considerations				
How can we be strategic in the use of this volunteer opportunity to raise awareness of homelessness in our community? What are our local goals in terms of raising awareness?	5/20/19	5/20/19		
Final PIT Report				
Product/Deliverable: Input to CSUS ISR research team related to the 2019 PIT Report by the October 2019 CoC Board meeting.				
Product/Deliverable: Recommendations related to future PIT Reports by the October CoC Board meeting.				
CSUS ISR will present questions about the 2019 PIT Report structure, format, and content emphasis to the committee for input.	4/22/19	4/22/19		
Member input for future PIT Reports	7/22/19	8/26/19		
Key Report Questions & Considerations				
What does HUD do with PIT data? What about the State of California? Is there a relationship between PIT results and funding?	-	-		to be addressed outside of the 2019 PIT Committee

Status	Upcoming
Color	In process
Code:	Complete

PIT Timeline

2020

	January	February	March	June
PIT Analytical Consultant	Announce RFP	RFP Due: Negotiate & Choose PIT Analytical Services Consultant	Analytical Services Begins	1) Implement Technology 2) Present protype to PIT Committee
PIT Event Consultant	Announce RFP	RFP Due: Negotiate & Choose PIT Event & Volunteer Consultant	1) Meet with PIT Committee 2) Reviews HUD Regulations 3) Reserve training sites & dates 4) Secure Photographer 5) Inform Law Enforcement of PIT Date 6) Reserve DHA Site	Research communication system (bulk texting, robocalling, etc.)

PIT Timeline

		July	August	2020 October	November	December
PIT Analytical Consultant		Present Training Documentation w/ Event Consultant	1) Website initiated 2) Build registration through website (& other thoughts of registering through CSUS site, TAY, & LGBT)	1) Website complete: registration through website set-up 2) Meet w/ law enforcement re: maps for first time	1) Online Trainings recorded 2) Analytics Maps shared with community for feedback	
PIT Event Consultant		1) Present Training Documentation w/ Analytical Consultant 2) Full-project plan completed with date and reservation 3) Outreach to; a) DHA to confirm volunteers, b) Sac State to confirm volunteers, c) other homeless services agencies to confirm volunteers 4) Choose public launch date	1) Communication system in place (bulk texting, robo calling, etc.) 2) Reach out to local colleges & other homeless-friendly cohorts with a "bring a friend" message 3) Develop TAY Strategy, LGBT Strategy, & Family Strategy, VIP Strategy	Book AmeriCorps for 4 nights, 2 nights prep, 2 nights event	1) Law enforcement engaged 2) Press Release (or in October?)	Train the Trainer model implemented (Interviewer & Counter?)

PIT Timeline

	2021				
	January	February/April	April	May	June
PIT Analytical Consultant	Finalize Law Enforcement Maps	1) Data Quality Review 2) Prepare Tables for HUD	Data Tables Due to HUD	Develop Local Report	Publish Local Report
PIT Event Consultant	Cut off Registration 5 days prior to event so no more new communications, only coordinating.				

TAY Targeted PIT Count Activities: Lessons Learned in 2019

The Sacramento 100 Day Challenge to Tackle Youth Homelessness Team and the Youth Action Board were highly engaged in assuring the most effective count possible. These are the takeaways from 2019.

What Worked:

1. The Every Youth Counts Event was a success. In addition to attracting 150 youth for surveying and engagement, it improved partnerships as local youth serving agencies networked with youth and one another. Waking the Village organized the event and Wind hosted the event at their site. In one day, youth could connect to health care, school, employment services, housing navigators, veterinary care and grooming for pet, HIV and STD testing, legal services for name and gender marker changes, and wellness services.

   A side lesson from this, having one agency, in this case Waking the Village, take on coordination sped up the process. Rather than calling endless meetings to plan, Waking the Village drove commitments through emails and phone calls.

2. Using the work of the PIT to assess a broader range of youth experiencing housing instability. HUD has well-documented that youth homelessness often is not category one homelessness. The Every Youth Count events spearheaded a supplemental survey that captured data on all types of homelessness, allowing us to better evaluate the types of intervention needs to support youth.

3. Dedicating experienced social workers to doing the surveys. In past years, surveys have been administered in a way that induces trauma. By ensuring that youth are surveyed by TIC trained youth workers, we minimize the negative impacts of the survey.

4. As always, involving youth in the process and training youth to lead teams on the night of the PIT Count is best practice. Youth led teams are able to navigate to youth experiencing homelessness and are trusted by those youth. Youth dodge teams with a police presence. Youth voice also was essential in refining the questions asked and the language of those questions in the supplemental survey.

5. CSUS absolutely won the trust of the youth providers and this translated into greater investment. They did not treat the PIT Count like a hoop jump and they were clearly concerned with capturing the truth of the youth experience. They attended meetings of the Homeless Youth Task Force and the Youth Action Board. They held special meetings to talk about the youth count. They allowed us to inform the process rather than

shooting down larger ambitions. They called providers frequently to clarify our perspective. It was a huge change from past years.

6. Planning began far earlier and engaged the youth providers and youth much earlier. This allowed for meaningful discernment of best practices.

7. Compensating youth leaders for their time and youth surveyed for their time was essential.

8. Attempts were made to reach and survey the over 700 youth on the coordinated entry list and on local agency wait lists. The challenge is no one picks up their calls anymore. We will want to strategize to reach these youth.

9. In general, this was hands down the most effective PIT Count Sacramento has ever conducted. The numbers felt the closest to reality. The report was excellent. This was a huge improvement on 2015 (when 0 unsheltered youth families were counted) and a vast change from the olden days of the 1990s when people would pretend to be homeless to ensure we had a somewhat decent census since the undercount was so severe. The app and the two night approach was fantastic.

Improvements:

1. We are missing the college students that experience homelessness. We need to identify point people on each campus willing to engage the youth they know are experiencing homelessness and get them counted. This is especially important since college homelessness is a new hot item in terms of funding. We want to be the community with the most data and action on this issue as funding rolls out.

2. Likewise, we are missing families and youth connected to schools. McKinney-Vento liaisons and school staff often know who is experiencing homelessness. With a bit of effort, we could capture these families. El Dorado has been effectively counting families and youth with this model.

3. Youth need transport to the Every Youth Counts event. We estimate that at least twice as many would have attended had someone committed to transport. Ideally, social workers throughout the county would assist in getting youth to the event. The youth at the event were all from agencies that committed to this warm hand off.

4. Every year the process for compensating youth is complicated. Sac Steps Forward needs to budget for its Youth Action Board (common practice in the best CoCs). Because reimbursements take months to secure, youth feel used or lied to. To prevent loss of

youth engagement, Waking the Village has been paying youth immediately and invoicing SSF, but this is not ideal and the reimbursements still take months to receive.

5. By attaching the supplemental survey to the PIT Count Survey, the HYTF, YAB, and 100 Day Team were denied access to important data for half a year. This heavily impacted grant proposals (perhaps even losing us the Youth Homelessness Demonstration Project grant). Many providers and youth were also frustrated by questions disallowed on the survey (largely related to the impact of police enforcement of anti-camping ordinances). In future years, the HYTF/YAB will conduct an independent annual survey so that we have greater control. This also allows us to capture all forms of youth homelessness.

6. The HYTF and YAB hold to the belief that a longer PIT Count term would improve youth (and family) counts. Focusing on a night time count means we miss so many youth and families as these sub-populations work especially hard to avoid detection. More day time events to capture these sub-populations would have high impact. There are models of cities taking this approach. It would make so much sense to have day time events at Loaves and Fishes to capture all the families at Mustard Seed School and Maryhouse.

7. As noted by many, the volunteer coordination got very confusing. Many folks did not get key emails received or answered. The coordinators role in supporting the youth count was never clear to most of the folks coordinating youth. That said, we thought that holding the training sessions closer to the actual count was a great idea.

8. We did not have the level of engagement from YAB that we had in 2017 in terms of actual involvement the nights of the count. We believe this relates to not doing the large, paid youth trainings as we did in 2017 and not having an overnight event for youth surveyers that night. That said, with finite energy to invest, we put most effort into the Every Youth Counts events and that had high pay off.

9. It is concerning that some entities get advance reading of the data and report while providers and other networks do not. In the days leading up to the release, it was obvious the city had the data and was able to get a jump on the press surrounding the report. Youth providers were denied access until the report was released and, despite partnering to release our own press release regarding the youth data, we could not get coverage as the city took control of the narrative. We need official protocols about who gets access to the report and we need broader voice in who defines the narrative behind those numbers.

SACRAMENTO HOMELESS MANAGEMENT INFORMATION SYSTEM DATA QUALITY PLAN

Proposed Q4 2019

Contents

Introduction

This document describes the Homeless Management Information System (HMIS) Data Quality Plan for the Sacramento Continuum of Care (CoC). The Plan includes data quality standards and protocols for ongoing data quality monitoring that meets requirements set forth by the US Department of Housing and Urban Development (HUD). It has been developed by HMIS Lead Agency Sacramento Steps Forward, in coordination with the CoC Advisory Board's HMIS & Data Committee, for approval by the Advisory Board. This Data Quality Plan will be updated annually, considering the latest HMIS Data Standards and locally developed performance plans.

The HMIS is Sacramento's electronic data collection system that maintains client-level data about the individuals and families who receive homeless and other human services throughout the community. The HMIS also assists agencies with project administration, operations, and reporting. Some of the typical benefits of an HMIS include:

- Improved service delivery and prompt referrals for clients

- Immediate access to important client information

- Quick and easy preparation of reports for funders, stakeholders

- Access to CoC-level performance data to inform system improvements

HUD requires that all CoCs receiving HUD grants utilize HMIS or similar database. The County of Sacramento also requires that all projects receiving CalWORKS and other County funding must report client-level data in HMIS. All VA-funded Grant Per Diem and Supportive Services for Veteran Families (SSVF) projects must also report client-level data in HMIS. The only current exceptions to these funders' requirements are projects and agencies specifically serving victims of domestic violence.

What is a Data Quality Plan?

A data quality plan is a community-level document that enhances the ability of the CoC to achieve statistically valid and reliable data. A data quality plan sets expectations for the CoC, the HMIS Lead Agency, and the end users to capture valid and reliable data on persons accessing the homeless assistance system.

Developed by the HMIS Lead Agency and formally adopted by the CoC, the plan:

- Identifies the responsibilities of all parties within the CoC with respect to data quality;

- Establishes specific data quality benchmarks for timeliness, completeness, accuracy, and consistency;

- Describes the procedures for implementing the plan and monitoring progress toward meeting data quality benchmarks; and

- Establishes timelines for monitoring data quality on a regular basis.

HMIS Data Standards

In May of 2014, HUD published the revised and final HMIS Data Standards. The May 2014 Data Standards replaced the March 2010 HMIS Data Standards by which client and project-level data reporting have been guided. The HMIS Data Standards identify Universal Data Elements, Program Specific Data Elements, and Project Descriptor Data Elements which are required of all homeless projects participating in the HMIS. Frequency of data collection and subsequent entry into the HMIS are also required.

Universal Data Elements

The Universal Data Elements establish the baseline data collection requirements for all homeless housing and/or service providers entering data into the HMIS. They are the basis for producing unduplicated estimates of the number of homeless people accessing services from homeless assistance providers, basic demographic characteristics of people who are homeless, and patterns of service use, including information on shelter stays and homelessness episodes over time.

The required Universal Data Elements include the following:

3.1	Name	3.10	Project Entry Date
3.2	Social Security Number	3.11	Project Exit Date
3.3	Date of Birth	3.12	Destination
3.4	Race	3.13	Personal ID
3.5	Ethnicity	3.14	Household ID
3.6	Gender	3.15	Relationship to Head of Household
3.7	Veteran Status	3.16	Client Location
3.8	Disabling Condition	3.17	Length of Time on Street, in an ES or SH
3.9	Residence Prior to Project Entry		

Program Specific Data Elements

Program-Specific Data elements provide information about the characteristics of clients, the services that are provided, and client outcomes. Many of these data elements represent transactions or information that may change over time. Most Program Specific Data Elements shall be captured at project entry and exit, and a few must be captured at project entry, exit, and on an annual basis.

The required Program Specific Data Elements include the following:

4.1	Housing Status	4.11	Domestic Violence
4.2	Income and Sources	4.12	Contact (Current Living Situation)
4.3	Non-Cash Benefits	4.13	Date of Engagement
4.4	Health Insurance	4.14	Services Provided
4.5	Physical Disability	4.15	Financial Assistance Provided
4.6	Developmental Disability	4.16	Referrals Provided
4.7	Chronic Health Condition	4.17	Residential Move-In Date
4.8	HIV/AIDS	4.18	Housing Assessment Disposition
4.9	Mental Health Problem	4.19	Housing Assessment at Exit
4.10	Substance Abuse		

Project Descriptor Data Elements

Project Descriptor Data Elements (PDDEs) contain basic information about projects participating in a CoC's HMIS and help ensure the HMIS is the central repository of information about homelessness. The PDDE's are the building blocks of the HMIS. They enable the HMIS to:

1. Associate client-level records with the various projects that client will enroll in across CoC projects;

2. Clearly define the type of project the client is associated with the entire time they received housing or services;

3. Identify which federal partner programs are providing funding to the project; and

4. Track bed and unit inventory and other information, by project, which is relevant for the Longitudinal Systems Analysis (LSA) , System Performance Measures, Housing Inventory Counts (HIC), Point In Time (PIT) counts, and bed utilization reporting.

Project descriptor data are generally entered and managed by the HMIS Lead Agency, not a project end user. They are created at initial project setup within the HMIS and shall be reviewed at least once annually and updated as needed.

The required Project Descriptor Data Elements include the following:

2.1   Organization Identifiers
2.2   Project Identifiers
2.3   Continuum of Care Code
2.4   Project Type
2.5   Method for Tracking Emergency Shelter
2.6   Federal Partner Funding Sources
2.7   Bed and Unit Inventory Information
2.8   Site Information - Optional
2.9   Target Population

Coordinated Entry Data Elements

The 2020 HMIS Data Standards now recognize and include the CoC's assessment and Coordinated Entry process through the addition of a shared Coordinated Entry project for assessing agencies. CE is a collaborative, CoC-wide project—meaning that as households are triaged and identified as experiencing homelessness, they are enrolled in the CE project with the appropriate start date, and then data can be collected by different agencies, at different points in time, to populate their single enrollment record in the project.

The required data elements include:

4.19.1 Date of Assessment   4.19.4 Assessment Level
4.19.2 Assessment Location   4.19.5 Assessment Questions
4.19.3 Assessment Type   4.19.5-A Assessment Answers

In addition to a primary assessment, subsequent client/ continuum activities ("Coordinated Entry Events") should be logged by participating agencies, including:

4.2.1 Date of Event
4.2.2 Event [type]

These events indicate client's movements and activities in the continuum.

Benchmarks and Goals

Timeliness

Timeliness answers the question: "Is the necessary client information entered into HMIS within a reasonable period of time?"

When data is entered in a timely manner, it helps reduce human error that can occur when too much time has elapsed between the data collection/service transaction and the data entry. Timely data entry also ensures that the data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Live Data Entry is highly recommended. There is a Timeliness Report that agencies can use under "Project Based Reports" to monitor the timeliness of data entry for entry into a project and exit from a project.

Each type of project has different expectations on timely data entry. Timeliness is measured by comparing the enrollment entry/exit date to the assessment entry/exit created date. Timeliness cannot be edited, only improved going forward – but assessment information dates should match the date the client interview occurred.

Data Entry Timeline by Project Type

All data shall be entered into the HMIS in a timely manner and Sacramento CoC's goal is to enter 100% of data per the following data entry timelines. As the COC recognizes entering 100% of all data may not be possible in all cases, a benchmark of 95% of all clients being entered in the following time frames has been established.

➢ **Emergency Shelter projects for Singles:** All Universal Data Elements and Project Specific Data Elements must be entered within **48 hours** of intake and/or exit.

➢ **Emergency Shelter projects for Families:** All Universal Data Elements and Project Specific Data Elements must be entered within **48 hours** of intake and/or exit.

➢ **Transitional Housing and Permanent Housing projects**: All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.

➢ **Permanent Supportive Housing (PSH):** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.

➢ **Prevention and Rapid Re-Housing projects:** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.

- ➢ **Supportive Service Only projects (SSO):** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.

- ➢ **Coordinated Entry projects (CEP):** All Universal Data Elements and Project Specific Data elements must be entered within three (3) days of coordinated entry event and/or change in living situation.

Program Descriptor Data Elements for all program types (Emergency Shelter, Transitional Housing, Permanent Housing, Prevention and Rapid Re-Housing, and Supportive Service Only programs) shall be entered concurrently with setup of the program in the Sacramento HMIS.

Completeness

Completeness answers the question: "Are all of the clients we serve being entered into HMIS? Are all of the necessary data elements being recorded into HMIS?"

Complete data is the key to assisting clients in finding the right services and benefits to end their homelessness. Incomplete data may hinder an organization's ability to provide comprehensive care to the clients it serves. Incomplete data can also negatively impact both the Sacramento Continuum of Care and Sacramento Steps Forward's ability to make generalizations of the population it serves, track patterns in client information and changes within the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG, and low HMIS data quality scores may impact renewal funding as well as future funding requests.

Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, including:

- ➢ Unduplicated counts of persons served;

- ➢ Patterns of use of persons entering and exiting the homeless assistance system in the community; and

- ➢ Evaluation of the effectiveness of the community's homeless assistance system.

Completeness – Universal and Program Specific Data Elements

Sacramento CoC's goal is to collect 100% of all data elements (**Universal and Program Specific**). Though the CoC recognizes that collecting 100% of all data elements may not be possible in all cases, this goal is set in order to guarantee that the CoC continues to meet HUD-funding compliance requirements and to further ensure participation by the CoC in the Annual Homeless Assessment Report (AHAR). Therefore, the Sacramento CoC's HMIS & Data Committee with the CoC Board's approval, has established Data Quality Thresholds (see Table 1, Appendix A). The Data Quality Thresholds set an acceptable range of "Missing/Data Not Collected", and "Client Doesn't Know/Client Refused" responses, depending on the data element. To determine compliance, percentages will be rounded (example: .04% becomes 0%).

HUD/Sacramento CoC expects that all clients receiving housing and/or services through the homeless assistance system will have their service delivery documented in the HMIS. If a project

only enters data on a few of its clients, the project's efficiency cannot accurately be determined. Incomplete data may erroneously reflect low bed utilization rates (for housing projects), and may inaccurately reflect clients' progress in meeting programmatic goals (i.e. employment, transitioning to permanent housing). All projects using the HMIS shall enter data on one hundred percent (100%) of the clients they serve. Due to a lack of historical data, these standards will be reviewed and revised annually to make sure the thresholds are reasonable.

Completeness – Project Descriptor Data Elements

Pursuant to HUD's HMIS Data Standards, all Project Descriptor Data Elements must be entered for all projects participating in the HMIS. In order to ensure that the CoC meets HUD-funding compliance requirements, the following acceptable response rate ranges have been established:

Project Descriptor Data Elements	TARGET %	ACCEPTABLE NULL/MISSING %
2.1 Organization Identifiers	100%	0%
2.2 Project Identifiers	100%	0%
2.3 Continuum of Care Code	100%	0%
2.4 Project Type	100%	0%
2.5 Method for Tracking Emergency Shelter Utilization	100%	0%
2.6 Federal Partner Funding Sources	100%	0%
2.7 Bed and Unit Inventory Information	100%	0%
2.8 Site Information – Optional	100%	0%
2.9 Target Population	100%	0%

Bed/Unit Utilization Rates

One of the primary features of the HMIS is its ability to record the number of client stays (bed nights) at a homeless residential facility. A project's bed/unit utilization rate is the number of beds/unit occupied as a percentage of the entire bed inventory. When a client is admitted into a residential project (emergency, transitional, or permanent), s/he is assigned a housing service. This housing service is named as "Housed with------name of the project or funding source". The client remains in this service until s/he is discharged from the project. When the client is discharged from the project, s/he is also discharged from this housing service in the HMIS.

Acceptable range of bed/unit utilization rates for established projects (as per AHAR [Precedessor to the LSA] Guidelines):

- Emergency Shelters: 65%-105%

- Transitional Housing: 65%-105%

- Permanent Supportive Housing: 65%-105%

A project's bed utilization rate is an excellent barometer of data quality. A low utilization rate could reflect low occupancy, but it could also indicate that data is not being entered in the Sacramento HMIS for every client served. A high utilization rate could reflect that the project is over capacity, but it could also indicate that clients have not been properly discharged from the project in the Sacramento HMIS.

Housing Inventory

The CoC Lead Agency will request housing inventory from each residential facility in the homeless assistance system at least annually. The homeless assistance provider operating the residential facility will provide its housing inventory when requested or when housing inventory has changed to the CoC Lead Agency in timely manner to ensure updates in HMIS.

The CoC recognizes that new projects may require time to reach the projected occupancy numbers and will not expect them to meet the utilization rate requirement during the **first six months** of operating.

Accuracy

Accuracy answers the question: "Does HMIS data accurately reflect true client information? Are the necessary data elements being recorded in HMIS in a consistent manner?"

Information entered into the HMIS needs to be valid, i.e. it needs to accurately represent information on the people that enter any of the homeless service projects contributing data to the HMIS. The best way to measure accuracy of client data is to compare the HMIS information with more accurate sources, such as a social security card, birth certificate, or driver's license. To ensure the most up-to-date and complete data, data entry errors should be corrected on a monthly basis.

As a general rule, it is a better practice to select "client doesn't know/refused" than to misrepresent the population.

Data consistency will ensure that data is understood, collected, and entered consistently across all projects in the HMIS. Consistency directly affects the accuracy of data; if an end user collects all of the data, but they don't collect it in a consistent manner, then the data may not be accurate. All data in HMIS shall be collected and entered in a common and consistent manner across all projects. To that end, all intake and data entry workers will complete an initial training before accessing the live HMIS system, and access additional training opportunities offered by the HMIS Administrator.

All Universal Data Elements and Program Specific Data Elements must be obtained from each adult and unaccompanied youth who apply for services through the homeless assistance system. Most Universal Data Elements are also required for children age 17 years and under.

Most Universal Data Elements and Program Specific Data Elements include a 'Client doesn't know' or 'Client refused' response category. These are considered valid responses if the client does not know or the client refuses to respond to the question. It is not the intention of the federal partners that clients be denied assistance if they refuse or are unable to supply the information. However, some information may be required by projects or public or private funders to determine eligibility for housing or services, or to assess needed services. The 'Client doesn't know' or 'Client refused' responses shall not be used to indicate that the case manager or data entry person does not know the client's response. The HMIS Data Standards assume that fields for which data are not collected will be left blank (i.e. 'missing'). Since Sacramento's HMIS system requires a response to all data fields before saving a record, the HMIS User must use a specific response category "Data not collected". In such cases, "Data not collected" response category is treated as missing data for reporting purposes.

Data Consistency Checks

 The HMIS staff will check data accuracy and consistency by running reports that check for entry errors such as duplicate files created, overlapping enrollments, or inconsistent responses. Examples of these checks will include:

1. Verification that new client profiles do not duplicate existing profiles
2. Verification that information describing a client's experience in homelessness conforms with other components of the clients record (e.g. a client's approximate date of start of homelessness cannot be AFTER a program enrollment)
3. Verification the referrals and referral responses are correctly entered.
4. Verification that housing start dates are entered correctly.

Data Quality Monitoring Plan

The purpose of monitoring is to ensure that the agreed-upon data quality targets are met to the greatest extent possible, and that data quality issues are quickly identified and resolved. The CoC recognizes that the data produced from the HMIS is critical to meet the reporting and compliance requirements of HUD, the individual agencies, and the CoC as a whole.

The HMIS administer will post quarterly dashboards reporting program-level performance concerning meeting data quality goals. The reports will include the standards laid out in the Data Quality Plan and will also include other data quality issues as determined by the HMIS Administrator. These public reports will not identify specific programs, but agencies will be able to identify their own data.

Roles and Responsibilities

HMIS Administrator

The HMIS Administrator is responsible for building reports and making them available to the CoC. This includes the data quality reports necessary for data correction. The HMIS staff will be responsible for the ongoing maintenance of existing reports as well, which includes changes in reports as updates are made to the system.

The HMIS team at Sacramento Steps Forward is also responsible for providing the necessary training for the CoC. Currently, the HMIS team offers the following trainings: New User training, Management Training, Report training, HMIS Security Training, Refresher Training (groups or one-on-one sessions). In addition, HMIS staff is available to provide technical assistance to users that need help correcting data entry errors.

On a quarterly basis, the HMIS staff will provide to the HMIS committee data quality reports for agencies funded by the CoC and offer additional training to those agencies that need to improve their data quality. The quarterly reports for the HMIS committee will provide information on timeliness, bed utilization rates, and data completeness for CoC-funded projects.

HMIS & Data Committee

The HMIS & Data Committee is responsible for reviewing data quality reports quarterly and working with HMIS staff and providers to correct data that does not comply with community-wide standards as established in the Data Quality Plan. The HMIS & Data Committee will maintain an ongoing relationship with the HMIS Administrator to identify training needs for the continuum based on monthly data quality reports.

<u>Data Review Timeline</u>

Monitoring and data quality reviews will be conducted quarterly by the HMIS & Data Committee, in an annual cycle as follows:

QUARTER	DATA UNDER REVIEW	TARGET REVIEW DATE
Quarter 1	Months 1 - 3 Data	**25th of the 4th Month**
Quarter 2	Month 4 - 6 Data	**25th of the 7th Month**
Quarter 3	Month 7 - 9 Data	**25th of the 10th Month**
Quarter 4	Month 10 - 12 Data	**25th of the 1st Month (New Cycle)**

Additional monitoring, data quality and utilization rates reviews will be conducted in preparation for submission of AHAR data to HUD, in accordance with the following schedule:

AHAR REVIEW MONTH	TARGET REVIEW DATE
October	**October 31st**
November	**November 30th**
December	**December 31st**
January	**January 31st**
February	**February 10th**

Target

When data quality benchmarks are met, reporting will be more reliable and can be used to evaluate service delivery, project design and effectiveness, and efficiency of the system. All HMIS partner agencies are expected to meet the data quality benchmarks described in this document. To achieve this, HMIS data will be monitored and reviewed in accordance with the schedule outlined in this section. All monitoring will be conducted by the Sacramento HMIS Lead Agency in accordance with the HMIS Data Quality Monitoring Tool (Design in Process), and with the full support of the CoC.

<u>Incentives and Enforcement</u>

To ensure that HMIS partner agencies meet the minimum data entry standards set forth herein, a copy of this Data Quality Plan will be posted to the HMIS Lead's website. Sample intake, annual Status Assessment, and exit forms are posted on HMIS Lead's website. The HMIS Lead will provide data quality reports to HMIS partner agencies in accordance with the monitoring schedule described in the "Monitoring" section to facilitate compliance with the minimum data entry standards.

Agencies that meet the data quality benchmarks will be periodically recognized by the CoC. HMIS partner agencies that do not adhere to the minimum data entry standards set forth herein will be notified of their errors and provided with specific information regarding the nature of the inaccuracies and methods by which to correct them. The HMIS partner agencies will be given one month to correct any identified data quality issues. Training will be offered to agencies that remain noncompliant with the minimum data entry standards. HMIS partner agencies continuing in default may have access to the HMIS suspended until such time as agencies demonstrate that compliance with minimum data entry standards can be reached.

Table 1, Appendix A

Universal and Program Specific Data Element Quality Thresholds

UNIVERSAL DATA ELEMENT	TARGET %	TH, PSH, HUD SSO, RRH, HP		ES, Non-HUD SSO		Outreach	
		Missing/ Data Not Collected	Client Doesn't Know/ Refused	Missing/ Data Not Collected	Client Doesn't Know/ Refused	Missing/ Data Not Collected	Client Doesn't Know/ Refused
3.1 Name	100%	0%	0%	0%	0%	0%	0%
3.2 Social Security Number	100%	0%	0%	0%	5%	0%	5%
3.3 Date of Birth	100%	0%	0%	0%	5%	0%	5%
3.4 Race	100%	0%	0%	0%	5%	0%	5%
3.5 Ethnicity	100%	0%	0%	0%	5%	0%	5%
3.6 Gender	100%	0%	0%	0%	0%	0%	0%
3.7 Veteran Status	100%	0%	0%	0%	5%	0%	5%
3.8 Disabling Condition	100%	0%	0%	0%	5%	0%	5%
3.9 Residence Prior to Project Entry	100%	0%	0%	0%	0%	0%	0%
3.10 Project Entry Date	100%	0%	0%	0%	0%	0%	0%
3.11 Project Exit Date	100%	0%	0%	0%	0%	0%	0%
3.12 Destination	100%	5%	5%	5%	5%	15%	5%
3.15 Relationship to Head of Household	100%	0%	0%	0%	0%	0%	0%
3.16 Client Location	100%	0%	0%	0%	0%	0%	0%
3.17 Length of Time on Street or in an Emergency Shelter	100%	0%	0%	0%	0%	0%	0%

	TARGET %	TH, PSH, HUD SSO, RRH, HP	ES, Non-HUD SSO	Outreach

PROGRAM SPECIFIC DATA ELEMENT		Missing/ Data Not Collected	Client Doesn't Know /Refused	Missing/ Data Not Collected	Client Doesn't Know /Refused	Missing/ Data Not Collected	Client Doesn't Know /Refused
4.1 Housing Status	100%	0%	0%	0%	0%	0%	0%
4.2 Income and Sources	100%	0%	0%	0%	0%	0%	0%
4.3 Non-Cash Benefits	100%	0%	0%	0%	0%	0%	0%
4.4 Health Insurance	100%	0%	0%	0%	0%	0%	0%
4.5 Physical Disability	100%	0%	0%	0%	0%	0%	0%
4.6 Developmental Disability	100%	0%	0%	0%	0%	0%	0%
4.7 Chronic Health Condition	100%	0%	0%	0%	0%	0%	0%
4.8 HIV/AIDS	100%	0%	0%	0%	0%	0%	0%
4.9 Mental Health Problem	100%	0%	0%	0%	0%	0%	0%
4.10 Substance Abuse	100%	0%	0%	0%	0%	0%	0%
4.11 Domestic Violence	100%	0%	0%	0%	0%	0%	0%
4.12 Contact	100%					0%	0%
Employed	100%	0%	0%	5%	5%	5%	5%