

## Meeting Minutes

### CSP All Agencies Administrators Meeting

July 9th, 2019 10:00 am – 12:00 pm

Location: CSB Conference Room

Attendees: Equitas- Trey; V0A- Betsy, William; Netcare- Helen; LSS- Joy, Cara; HuckHouse- Lynda; VA- Rich, Jaime; YWCA- Christina; NCR- Marsha, Tonya; HFF- Tiffany, Sarah; TSA- Brittani, YMCA- Kevin, Colton, Cheri; Gladden – Kevin; Community Shelter Board- Lianna Barbu, Thaddeus Billman, Travis Theders,

#### **A. Welcome and Flow of the Day**

- a. Travis went over the flow of the day and introductions.

#### **B. FY20 Data Standards Update**

- a. Travis review the upcoming changes to the HUD Data Standards effective October 1<sup>st</sup>, 2019.
- b. The Contact data element used by outreach has been changed to 4.12 Current Living Situation and will address where the client is staying more specifically than the previous question of “Is the client currently living on the streets or in Emergency Shelter (Yes/no)?”
- c. Response options for Prior Living Situation, Current Living Situation, and Exit Destination have been standardized and can be found in Appendix A of the HUD Data Standards.
- d. Developmental and HIV/AIDS disability types - removed dependent element “Expected to substantially impair ability to live independently.”
- e. Domestic Violence – added collection requirement for PATH and SSVF projects.
- f. PATH Status – added option for “unable to locate client.”
- g. Sexual Orientation – added “Other” option.
- h. Pregnancy Status – clarification added that all female HoHs, regardless of age, should have a value entered.
- i. Two new data elements added for coordinated entry projects – Coordinated Entry Assessment and Coordinated Entry Event. Coordinated Entry Assessment is a set of questions determined by each CoC to determine a client’s homeless status. Coordinated Entry Event captures the outcome of the assessment and is similar to our currently used Contact Resolution field. Guidance for these new fields is vague and CSB, HUD, and HMIS vendors are still determining the best way to implement these fields. Collection is not required until April 1<sup>st</sup>, 2019. These new elements will impact the entire system, but we aren’t sure how they will look in CSP yet.
- j. Travis will update the CSB Data Dictionary and Data Collection forms as needed.

#### **C. System Performance Measures**

- a. Lianna reviewed the FY18 System Performance Measures with the group.
- b. As a reminder these measure are very important and impact our ranking and the amount of funding received from HUD. CSB is evaluated based on measure comparison to previous years, not comparison to other CoCs.
- c. Measure 1: Length of Time Persons Remained Homeless – The average Length of time Homeless in FY18 was 57 days for ES and 60 days for ES & TH. This number has been increasing over the last few years, which will reflect negatively to HUD.
- d. Measure 2: Returns to Homelessness – This is our recidivism measure and looks at each project type individually as well as the system as a whole. Recidivism is measured in timeframes of Returns to Homeless in 6 months (FY17 = 9%, FY18 = 10%), 6-12 months (FY17 = 8%, FY18 = 10%), 13-24 months (FY17 = 10%, FY18 = 9%), within 2 years (FY17 = 28%, FY18 = 28%). Short-term recidivism

rates increased, while longer timeframes decreased or remained the same. Increases are mostly due to 5-6% increases in recidivism from FY17 for Street Outreach and Permanent Housing project types.

- e. Measure 3.1: Change in Point in Time Count – There was an increase in Emergency Shelter counts from 1229 in FY17 to 1427 in FY18, decrease in Transitional Housing counts from 122 in FY17 to 92 in FY18, and a decrease in Unsheltered Counts from 340 in FY17 to 288 in FY18.
- f. Measure 3.2 Change in Annual Counts: The number served decreased in all areas – Sheltered and Unsheltered counts – from FY17 to FY18. This appears good to HUD, but we know that this decrease is false and is due to being unable to serve all clients as there are extensive waitlists due to the increase in Measure 1, Length of Time Homeless.
- g. Measure 4: Employment and Income Growth for Homeless Persons – There were increases in all areas. Total income growth increased from 26% in FY17 to 33% in FY18. Thanks to Thaddeus and partner agencies for working together to find and correct a large amount of data entry errors that made this increase possible. Going forward, we need to continue this approach and work at the client level to see where increases can be made.
- h. Measure 5: Number of Person Who Become Homeless for the 1<sup>st</sup> Time – We saw a decrease from 8951 in FY17 to 8654 in FY18. This is a positive change, but is largely impacted by the increase in Measure 1, Length of Time Homeless.
- i. Measure 7a.1: Change in Successful Exits from Street Outreach – There was a small positive increase from 64% in FY17 to 65% in FY18.
- j. Measure 7b.1: Change in Successful Exits from Emergency Shelter, Transitional Housing, and Rapid Re-housing – There was a small positive increase from 47% in FY17 to 48% in FY18.
- k. Measure 7b.2: Change in Successful Exits to or Retention of Permanent Housing – This remained the same at 93% from FY17 to FY18. This is a very good rate and hard to increase any further.
- l. Destination Error percentages (Client Refused, Client Doesn't Know, Data Not Collected, No Exit Interview Completed) decreased drastically system-wide thanks to efforts by Thaddeus and partner agencies to correct data. Agencies previously agreed to try to aim for 5% error rate or below for each project type. Current rates are:
  - i. 7.54% for Emergency Shelter
  - ii. 1.08% for Transitional Housing
  - iii. 4.40% for PSH
  - iv. 0.51% for RRH
  - v. 1.32% for Street Outreach
- m. Trey asked how we compare nationally. Lianna mentioned that we did an analysis comparing CSB to other Ohio CoCs and similar sized CoCs across the country. Travis will bring this analysis to the next admin meeting.

#### **D. HMIS & Vendor Checklists**

- a. Travis reviewed the HMIS System Admin and HMIS Vendor checklists. These are checklists released by HUD detailing the roles and responsibilities of a CoC's System Admin (Travis) and the HMIS Vendor (Wellsky).
- b. On the HMIS System Admin checklist, the only item not checked off is "Develop and manage a disaster recovery protocol for System Admin/HMIS Lead paper and electronic HMIS documents and agreements." CSB has a disaster recovery protocol for its office, but we have reached out to Wellsky for specifics on their disaster recovery protocol as it relates to CSP data.
- c. On the HMIS Vendor checklist, the following items were not checked off. We have reached out to Wellsky for clarification on these:
  - i. The HMIS Software Vendor provides a disaster recovery plan.
  - ii. The HMIS Software has features that allow those with disabilities or with special needs to enter and report data (508 compliance).

- iii. The HMIS Software has a data dictionary, clear naming conventions and transparency in table structure to support reporting and data import and export.
  - iv. The HMIS Software has logical workflow that eliminates redundant data entry and prevents wasted effort of data entry across multiple screens or modules.
  - v. The HMIS Software can track geocoded data that can be turned into maps.
  - vi. The HMIS software can collect electronic signatures.
  - vii. The HMIS Software allows real-time data analysis.
  - viii. The HMIS Software provides rating and ranking reporting capabilities to aid with the CoC Application.
  - ix. The HMIS Software has coordinated entry process reports available (including reports for prioritization, referral, and active list management purposes).
  - x. The HMIS Software produces email notification for HMIS user level actions items.
- d. Admins were asked to review these checklists on their own time and let Travis know if they think an item is not being fulfilled or if they have questions.

#### **E. PR&C**

- a. Travis noted that CSB is about halfway through the PR&C season and has noticed much improvement from previous review years.
- b. Travis clarified the confusion around the “Does the Client have a Disabling Condition” questions.
  - i. All disabilities should be added to CSP.
  - ii. Does the Client have a Disabling Condition” (Yes/No) should only be answered “Yes” if the client has a disabling condition that is:
    - 1. Long continued or indefinite duration AND substantially impairs their ability to live independently.
    - 2. A developmental disability as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000; or
    - 3. AIDS/HIV related disability
  - iii. “Does the Client have a Disabling Condition” (Yes/No) should only be answered on the entry assessment. If there is a change during the client’s stay in the project, the answer should be changed on the entry assessment. This question has been removed from the interim and exit assessment.
  - iv. Disability sub-assessment data should be collected and updated as normal at either Project Start, Interim/Update, and Project Exit. Start date does **not** have to match entry date for disabilities acquired after project entry.
  - v. Because of this change, it is possible that a client may have “Does the Client have a Disabling Condition” (Yes/No) marked as “Yes” at entry, but no disability sub-assessment data entered at entry.

#### **F. TAY Assessment**

- a. Travis reminded the group of the agreement to collect and complete the TAY Assessment for Transition Age Households (all adults in the household between 18-24 years of age) in RRH, PSH, TH, and Prevention projects starting 7/1/19.
- b. CSB will not be QAing this data for non-YHDP projects. CSB recognizes the concern that clients may give more frequent “Refused” responses to these questions.
- c. Nina and Betsy asked about collection of these data elements for clients already open in projects as of 7/1/19. CSB will not require retroactive data collection for clients already open in projects, however collection of these elements during annual reviews for PSH clients would be ideal to get the initial data.

- d. Travis addressed concerns regarding the sensitivity of some of the exit assessment questions related to sex trafficking and exploitation. Guidance from the YHDP trainings has been that, although these data elements are recorded on the exit assessment in CSP, it is usually best to collect them prior to exit, once a trusted relationship has been formed with the client.
  - i. Travis will make the TAY Exit Assessment available in CSP during annual review updates to accommodate.
- e. Forms for these TAY assessments are available on the CSB website.

#### **G. CSP Trainings**

- a. There are big changes to the CSP training format going forward. For new HMIS users, basic training will be conducted by their Agency Administrator. Follow-up training will be conducted via training videos on the CSB website.
- b. To access the videos, go to <https://www.csb.org/providers/columbus-servicepoint> and click on the “CSP Training Access” link on the right-hand side. Currently only admins can log in, so they will need to do so for their users. To login, use the email linked to your CSP account as the username (ex: *ttheders@csb.org*) and the password *cspadmin*.
- c. Once a user has completed basic training and video training, Travis will administer the certification test which will include providing the user with three mock-intake forms. Two of these will have mistakes and one will not. Users must determine which form is mistake-free and complete the data entry in the CSP training site. Travis will then review and assess the users proficiency and understanding.
- d. Travis will still hold monthly or bi-monthly office hours to accommodate any special training needs and questions.
- e. Travis will provide a training manual in the near future.

#### **H. QA Timeframe**

- a. Due to increased reporting requirements on the quarterly SPIR, Thaddeus and Jeremiah need more time to prepare the data. Travis and Lianna asked the group if shortening the QA deadline is possible.
- b. Many admins expressed that the current QA deadline is already a struggle to meet, especially around quarters that have holidays – Christmas, New years, July 4<sup>th</sup> etc.
- c. The group agreed that while shortening the deadline for the initial “1<sup>st</sup> round” deadline is not possible, the deadline for corrections and “2<sup>nd</sup> round” submissions can be shortened.
- d. Submitting QA reports before the deadline is helpful and allows Travis to review and submit feedback before the deadline.

#### **I. CSP Administrator of the Year**

- a. Cheri from the YMCA was awarded with the CSP Administrator of the Year Award for her proactive approach to quality assurance, care for data accuracy and consistency and reliability as an administrator. She was awarded a certificate and gift card for her contribution.

**J. Next Meeting is October 9<sup>th</sup>, 2019 from 10:00am-12:00pm.**

**K. Adjourn**