

HMIS Advisory Group
Meeting Minutes April 21, 2004
CSCNH Conference Room
Concord NH

Present: Russ Bloch(RB), Steve Eckberg(SE), Pam English(PE), Tony Epaphras(TE), Marianne Feliciano(MF), Joie Finley Morris(JFM), JoAnn Maynard(JM), Klaas Nijhuis(KN), Henry Vincent(HV).
Not Present: Miles Pendry(MP) - out sick - get well soon!

Meeting convened 2:10 pm. Introductions around the table.

SE expressed thanks to all for volunteering to participate as we work to get our NH HMIS in place as required by HUD. General background on HUD's requirements that all CoC's create an HMIS to improve unduplicated count on homeless and to get better data on causes / sources of homelessness.

JFM asked about decision to host data on Bowman servers in Louisiana rather than in NH as previously planned. HV reviewed: As Bowman has grown, system architecture makes it more difficult to keep "remotely hosted (data on servers in NH)" installations up to date. As they do upgrades to the many components of ServicePoint software, it is much easier to do that once in central location (servers at their site) than at many remote sites. (Not stated: Bowman has approx. 180 clients now, approx 90% with data on servers in LA). The cost of hosting data on servers in NH or LA is very similar - not a significant saving one way or the other.

Discussion (lengthy) about requirements on WHO must participate in HMIS. HUD rules say that any program receiving McKinney-Vento funding (SHP & S+C thru CoC competitive grant) or ESG formula grant(to OHHS) must participate. OHHS has said further, that programs that receive SGIA funds will also participate. JM explained that whereas a shelter may receive HUD funding one year and then SGIA funds the next year in an alternating fashion, in order to create uniformity in reporting across programs and through time, this broader participation requirement makes sense.

[HUD rules that we are currently referring to are Draft version of FR 4848-N-01 the Data and Technical Standards for HMIS. It is likely that Final version will not be published until this summer. These are available online via a link on the right hand side of this web page <http://www.hud.gov/offices/cpd/homeless/hmis/index.cfm>]

Discussion about how to address the known, or anticipated, inaccuracy of the system in terms of imperfect data and the goal to create unduplicated count. TE asked KN to explain Nashua CoC's unique identifier system that is used to improve data quality of their one day count process. KN says they have reporting shelters do more than just submit a number of clients served but to report a list of unique ID's of clients served. ID is created using first 2 initials of last name, number of adult males, number of adult females and 2 digit number of children. For example if Smith family with father, mother and 2 children present at shelter for service they would be "ID'ed" as SM1102 in count of clients served. Of course family composition may change over time so if Smith family presents at another shelter again

6 months in future if could be that father has left and new ID would be reported as SM0102. Nashua CoC uses this info to do deduplication - both electronically as well as through group meeting where shelter representatives review similar ID's and using their personal knowledge of client population may be able to further deduplicate "manually." ServicePoint uses a similar method of creating a unique ID using client's information though it uses more fields of info and creates a longer ID. This facilitates deduplication of data. There are very real limitations to any system of unique IDs: 1) Client must supply accurate information 2) Client must supply consistent information at different service providers 3) Client must be willing to have data entered into database system. These issues are inherent in any system used but even with these limitations the result of accomplishing some deduplication will be generally better than we are doing with current methodology.

The group expressed concerns about some specific language in drafts of documents that SE had distributed via email in advance of meeting - Client Consent Form, etc. PE stated that these will certainly need legal review and blessing. SE acknowledged same but felt it premature to do that at this time. SE feels that the general language ought to be okay with everyone before legal review.

In addition to specific language concerns, there was discussion about the possible detrimental effect of client consent forms (and other questioning) on establishing & maintaining trust with clients at this very vulnerable point in time - their seeking help/services at a shelter. [Note by SE - This issue serves to identify a real training need in implementation of HMIS - outreach and intake workers will need specific training in presenting these consent forms to clients as they may be a barrier to service delivery. (NOTE: barrier in the sense of establishing trusting relationship with client - HUD specifically states that client refusal to participate in HMIS shall not be cause for refusal of services)].

Discussed establishing a minimum data set that all providers could use for "common intake." Minimum data set most likely driven by data needs in HUD Annual Progress Report (APR). See APR online at: <http://www.hud.gov/offices/cpd/homeless/apr.doc> Related issues arose such as validity/reliability/appropriateness of asking questions of client about Mental Illness, Drug & Alcohol Abuse, HIV/AIDS status.

Several people had to leave at 3:30. Discussion continued until 3:45.

ACTION ITEMS:

- 1) SE to gather existing permission and consent forms from various providers to review and inform process of HMIS Client Consent form. Please consider this your official solicitation to email or fax them to SE & HV at 225-4158
- 2) SE to create document with proposed minimum data set for "common intake" form.
- 3) SE to send out several suggested dates for next meeting. Check your email.