Governing Board Meeting: Thursday, May 27, 2021

Zoom: https://zoom.us/j/92847713203?pwd=WTluSW9UdUYwdS9keDFqcGNXRy9Udz09

Board Members			
Kathryn Firmin-Sellers, Chair	Gerard Littlejohn, Vice Chair	Lashieka Hardin, Secretary	Warren Wooten
Stacy Lowry	Anthony Ryback	Sonia Jenkins	Trish Hobson
Maya Marshall	Deronda Metz	Stephen McQueen	Anna London
Alesha Eaves	Dennis LaCaria	Timica Melvin	Deanna McCool
Pamela Malatestinic	Victor Nicholson	Hope Marshall	

Agenda

Time	Item	Facilitator
2:00pm-2:05pm	Welcome, attendance	Kathryn Firmin-Sellers (welcome) Branden Lewis (attendance)
2:05pm-2:10pm	Public Comment: General Remarks	Branden Lewis
2:10pm-2:15pm	**VOTE: Approve meeting minutes** (April 22, 2021)	Kathryn Firmin-Sellers
2:15pm-2:40pm	System Performance Measure: Length of Time Homeless Data Presentation & Board discussion in breakout rooms	Courtney LaCaria
2:40pm-2:45pm	American Rescue Plan (ARP) Workgroup: Update on Inlivian's EHV	Timica Melvin and Branden Lewis
2:45pm-3:05pm	Implementation of Strategic Plan (Breakout Rooms)	Kathryn Firmin-Sellers
3:05pm-3:15pm	FY2021 NOFA Scorecard Recommendation	Deborah Majewski, Chair of Ranking Committee
3:15pm-3:25pm	2021 PIT/HIC Submission	Courtney LaCaria
3:25pm-3:35pm	CoC Data Quality Standards	Mary Ann Priester
3:35pm-3:40pm	CoC Workgroups: Vulnerability Review Workgroup & Home4Good Framework Workgroup	Erin Nixon
3:40pm-3:45pm	Public Comment	Branden Lewis
3:45-3:50	**VOTES:** -Approve Recommended scorecard -Approve PIT/HIC Submission -Approve Data Quality Standards -Dissolve Vulnerability Workgroup (will move to be a sub-committee of the CEOC)	Kathryn Firmin-Sellers
3:50pm-4:00pm	Community Updates	CoC Board Members
4:00pm	Adjourn	Kathryn Firmin-Sellers

Next CoC Governing Board meeting: Thursday, June 24,2021, 2pm-4pm

Our Vision: Homelessness is rare, brief and non-recurring in the Charlotte-Mecklenburg Community. Everyone has housing choices and prompt access to a variety of housing resources and supports that meet their needs.

Charlotte-Mecklenburg CoC Governing Board Meeting Minutes

Thursday, April 22, 2021

1. Welcome
    a. **Board Members present:** Kathryn Firmin-Sellers, Stacy Lowry, Alesha Eaves, Pamela Malatestinic, Gerard Littlejohn, Anthony Ryback, Deronda Metz, Dennis LaCaria, Victor Nicholson, Lashieka Hardin, Warren Wooten, Trish Hobson, Deanna McCool
    b. **Board Members absent:** Maya Marshall, Sonia Jenkins, Stephen McQueen, Timica Melvin, Hope Marshall, Anna London
    c. **Members of public present:** Kim Sanders (Mecklenburg County Community Support Services), Mary Ann Priester (Mecklenburg County Community Support Services), Nicole Dewitt (Social Serve), Harry Mack (Social Serve) Courtney LaCaria (Mecklenburg County Community Support Services), Deborah Majewski (The Leon Levine Foundation), Tara Peele (Social Serve), A.W. Burgess (Family Mankind), Lisa Adams (Mecklenburg County Community Support Services), Kimberly Cole (Inlivian)
2. Public Comment
    a. No public comment
3. **VOTE:** Approve meeting minutes
    a. Dennis LaCaria moved to approve minutes
    b. No opposition
    c. Motion approved
4. Data Presentation
    a. Courtney LaCaria → Presenting data dis-aggregated by race and ethnicity
        i. Please see PowerPoint
    b. Big takeaways:
        i. Black/African Americans are overrepresented by race/ethnicity
        ii. Exits to permanent housing by race/ethnicity → this data pulled 2019 and 2020 data. Question (Deronda): what does this slide mean? (A: Courtney LaCaria) This slide just compares the exit by race/ethnicity. It shows of the people who exited permanent housing, how many were White, Latino, Black, etc. This doesn't necessarily show how fast. Answer: Trish → A lot more African Americans are exiting to permanent housing. Does this make sense since they are overrepresented? Are there any conclusions to draw here?
        iii. Returns to homelessness within 6 months → this shows exits to permanent housing and then returns to homeless by race & ethnicity. Board members discussed what the data shows and if this shows that disparities still exist once Black people have entered the homeless system. Information that Mecklenburg County's CoC numbers are lower than the national average.
        iv. Discussion: do we as a board need to sit on more data and system performance numbers?
5. Evaluate Upstream Update
    a. Courtney LaCaria discussed Evaluate Upstream.
    b. See Evaluate Upstream slides
    c. Prevention targets people who have not yet lost their housing.

d. Prevention assistance includes different forms and tiers such as Tier 1: community wide interventions, Tier 2: cross-sector coordination (ex: legal aid and crisis collaboration), and Tier 3: Targeted intervention such as helping to prevent evictions with financial and legal assistance.

e. Project milestones mentioned. See evaluate upstream slides.

f. Five Blueprint Impact Areas:
    i. Develop an effective, comprehensive, and holistic homelessness prevention assistance system
    ii. Creatively expand access to and availability of affordable housing
    iii. Close gap between household income and cost of living
    iv. Support policies and practices that reduce and/or remove barriers
    v. Eliminate race and ethnicity-based income disparities and wealth accumulation gap

6. Implementation of Strategic Plan
    a. Discussion about a Champion being selected for each section of the Strategic plan. The goal of the Champion is to be the liaison between the committee and the board.
    b. Kathryn Firmin-Sellers: **VOTE** to sign letter of support for City Comprehensive Plan
        i. Trish Hobson: motion for CoC to sign letter, Lashieka Hardin second
        ii. No discussion
        iii. No opposition
        iv. Recuses: Warren Wooten
        v. Motion approved

7. American Rescue Plan Advocacy
    a. See slides on CoC Governing Board's Recommendations for ARP Funding
    b. Deronda: when will funding be available and when will organizations have to spend it?
        i. Erin Nixon: not 100% sure when it is coming
        ii. Warren: hasn't seen anything with dates but will let people know once he does

8. Reallocation Policy
    a. Please see CoC Reallocation Process Policy
    b. The CoC encourages new and existing providers to apply for new projects each fiscal year in accordance with identified community priorities, strategies, and resource gaps. Chronic underspending or underperformance by a project risks recapture of those funds by the federal Department of Housing and Urban Development, making those funds unavailable to the community for use in ending homelessness. Therefore, the CoC has developed this policy to provide rules that govern the process for reallocation.
    c. Effective June 1, 2021.
    d. For the 2021 NOFA only, if a project has spent at least 85% of its allocation for each of the past two project periods or served at least 85% of its projected participants, the project will be granted a one year deferral of the application of this policy.
    e. Deronda: Motion to approve reallocation policy, Victor Nicholson second.
    f. No opposition.
    g. Motion approved.

9. CoC Board & Collaborative Applicant MOU

a. Please see meeting materials for the Memorandum of Understanding Between Charlotte-Mecklenburg Continuum of Care (NC-505) Governing Board And the Collaborative Applicant: Mecklenburg County Community Support Services Department
   b. No Public Comments shared.
   c. Victor Nicholson: Motion to approve collaborative applicant MOU, Deronda Metz: second.
   d. No opposition.
   e. **Motion approved.**
10. Public Comment/Welcome New Board Member
    a. Deanna McCool welcomed onto the CoC Board. Deanna was elected by the CoC Full Membership at its last meeting and represents the Street Outreach/Prevention/Diversion elected seat. Deanna works as a Housing Coach/Street Outreach at Ada Jenkins Center.
11. NOFA (Notice of Funding Availability) Timeline
    a. Erin Nixon: the Collaborative applicant is responsible for submitting the community's collaborative application on behalf of the CoC, which includes project applications. HUD may release the Notice of Funding Availability (NOFA) in June and the application would be due roughly 12 weeks after that. There may be extra money available through reallocation or bonus funds and the Board will decide the priorities for this funding. At the next meeting in May, the goal is to have a score card that will be used to evaluate and rank the applications.
12. Community Updates
    a. Deronda: (City funding related to hotel purchases) moved back to the Center of Hope on Tuesday. They have almost 200 guests. There is capacity in the shelters. Quality Inn and Super 8 guests were moved to the Center of Hope. They have about 168 families still in hotels. Once it was time to move back to the Center of Hope a lot of families self-resolved. As much as there are talks about housing shortages, we are moving more people into housing than ever.
    b. Mary Ann: (prioritization process and tools approved) the prioritization workgroup pulled together a more equitable tool for our community. The process was approved by the Coordinated Entry Oversight Committee on Tuesday. They've improved prioritization processes. Different factors come up with a vulnerability score then individuals are housed based on that vulnerability score.
    c. Kathryn: United Way received funding from the City to support people who were in the encampment. United Way will contract with Catholic Charities to provide support services and Social Serve will administer the rental subsidies.
13. Collaborative Applicant Updates
    a. Branden: CoC: 101 Information Session was held on April 7th. There were about 30 attendees. It was very well received. They did a broad overview of CoC, workgroup, responsibilities, weekly digest, funding availability, and the different components. Feedback from the survey was all positive. People would like to see the information session take place quarterly. Looking to hold the next one in July. The last CoC full meeting was held April 14th. The meeting was well attended. The Point in Time count data is due to HUD by May 14.

14. Adjourn
    a. Motion to adjourn: Deronda Metz; Second: Warren Wooten
    b. Meeting adjourned at 3:52pm.

Name	3/26/2020	4/24/2020	5/28/2020	6/25/2020	7/23/2020	8/20/2020*	9/24/2020	10/1/2020*	10/22/2020
Collins, Dave (duties reassigned 2/2021)							x	x	Absent
Eaves, Alesha	x	x	x	x	x	x	x	x	x
Firmin-Sellers, Kathryn	x	x	x	x	x	x	x	Absent	Absent
Haken, Lily (resigned from Board 7/23/2020)	Absent	x	x	x	x				
Hayes, Patrick (resigned from Board 10/22/2020)	x	x	x	Absent	x	x	x	x	x
Hobson, Trish									
Jenkins, Sonia	x	x	x	Absent	Absent	Absent	Absent	Absent	x
LaCaria, Dennis	x	x	x	x	Absent	x	x	x	x
Littlejohn, Gerard							x	x	Absent
London, Anna									
Lowry, Stacy	x	x	x	x	x	x	x	x	x
Malatestinic, Pamela									
Marshall, Hope	x	x	x	x	x	Absent	x	Absent	x
Marshall, Maya	x	x	x	x	Absent	x	Absent	Absent	Absent
McCool, Deanna									
McQueen, Stephen	x	x	x	x	x	x	x	Absent	x
Melvin, Timicia	Absent	x	x	x	x	Absent	Absent	x	Absent
Metz, Deronda	x	x	x	x	x	x	x	Absent	x
Montgomery, Tchernavia (resigned from Board 2/25/2021)	x	x	x	x	x	x	x	x	x
Nicholson, Victor							x	x	x
Ryback, Anthony	x	x	x	x	x	x	x	Absent	x
Tucker, Rodney (resigned from Board 10/7/2020)	x	x	x	x	Absent	Absent	Absent	Absent	
Wooten, Warren	x	x	x	x	x	x	x	x	x
*special Board meeting									

Name	11/19/2020	12/11/2020*	1/13/2021*	2/25/2021	3/25/2021	4/22/2021	5/27/2021
Collins, Dave (duties reassigned 2/2021)	Absent	Absent					
Eaves, Alesha	x	Absent	x	x	x	x	
Firmin-Sellers, Kathryn	x	x	x	x	x	x	
Haken, Lily (resigned from Board 7/23/2020)							
Hayes, Patrick (resigned from Board 10/22/2020)							
Hobson, Trish				x	x	x	
Jenkins, Sonia	x	x	x	x	x	Absent	
LaCaria, Dennis	x	Absent	Absent	x	x	x	
Littlejohn, Gerard	x	x	Absent	x	x	x	
London, Anna				x	x	Absent	
Lowry, Stacy	x	x	Absent	Absent	x	x	
Malatestinic, Pamela				Absent	x	x	
Marshall, Hope	x	x	x	x	x	Absent	
Marshall, Maya	Absent	Absent	x	Absent	Absent	Absent	
McCool, Deanna						x	
McQueen, Stephen	x	Absent	x	x	x	Absent	
Melvin, Timicia	Absent	Absent	Absent	x	x	Absent	
Metz, Deronda	x	x	x	x	x	x	
Montgomery, Tchernavia (resigned from Board 2/25/2021)	x	x	x	x			
Nicholson, Victor	x	Absent	x	x	x	x	
Ryback, Anthony	x	Absent	x	x	x	x	
Tucker, Rodney (resigned from Board 10/7/2020)							
Wooten, Warren	x	x	x	x	x	x	

CHARLOTTE-MECKLENBURG CONTINUUM OF CARE GOVERNING BOARD DATA REPORT
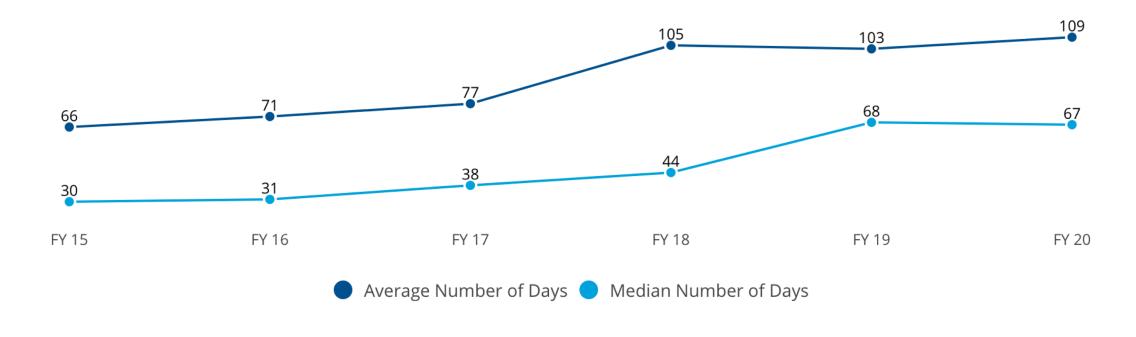
27 MAY 2021

1

How has Charlotte-Mecklenburg performed relative to the system performance measure below over time?
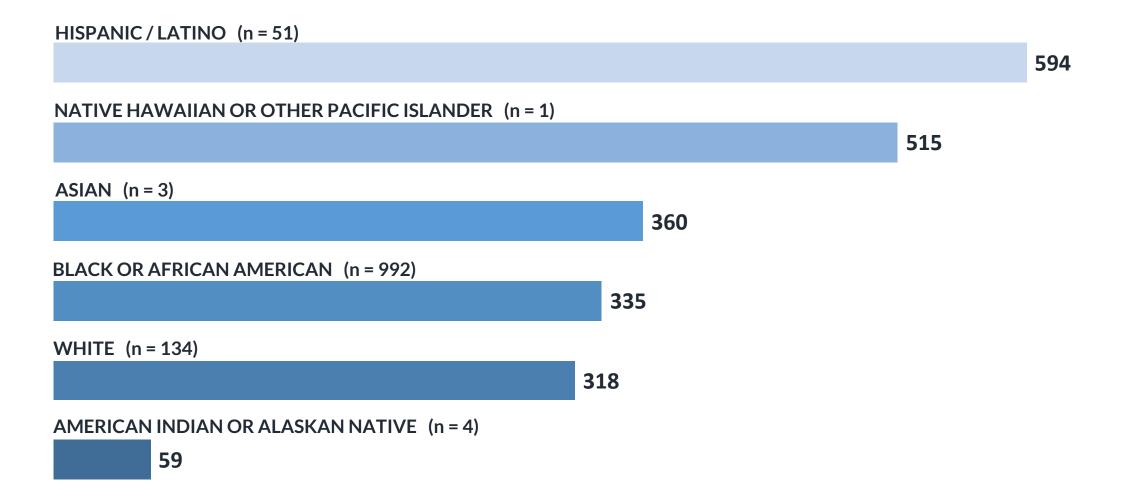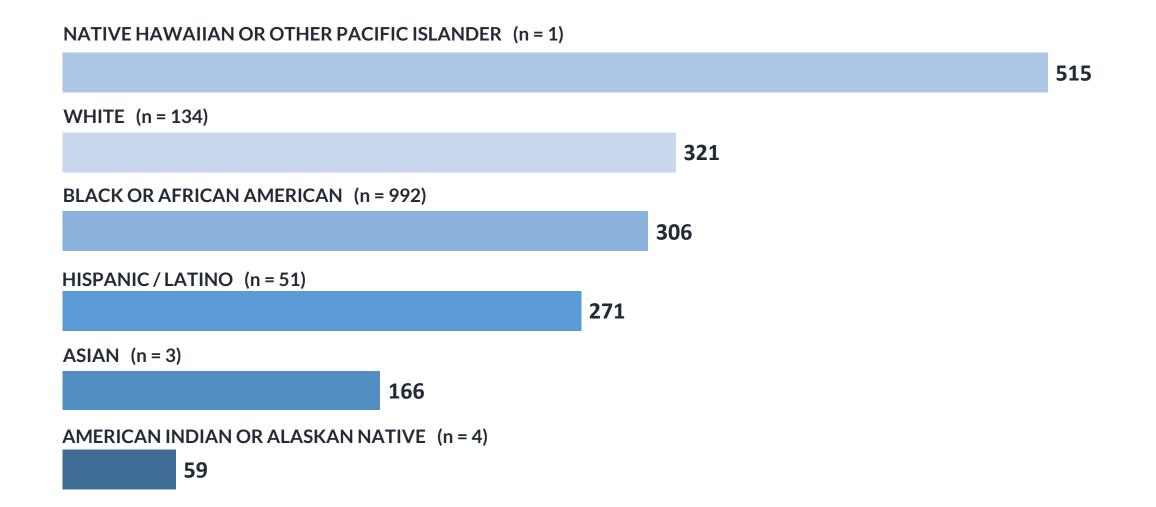
Length of Time Individuals Experience Homelessness?

LENGTH OF TIME FROM HOMELESSNESS TO PERMANENT HOUSING IN CHARLOTTE-MECKLENBURG, DISAGGREGATED BY RACE & ETHNICITY

SIX-MONTH AVERAGE | ONE NUMBER, DEC 2020 – MAR 2021

HISPANIC / LATINO (n = 51) — 594

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (n = 1) — 515

ASIAN (n = 3) — 360

BLACK OR AFRICAN AMERICAN (n = 992) — 335

WHITE (n = 134) — 318

AMERICAN INDIAN OR ALASKAN NATIVE (n = 4) — 59

LENGTH OF TIME FROM HOMELESSNESS TO PERMANENT HOUSING IN CHARLOTTE-MECKLENBURG, DISAGGREGATED BY RACE & ETHNICITY

SIX-MONTH MEDIAN | ONE NUMBER, DEC 2020 – MAR 2021

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (n = 1)
515

WHITE (n = 134)
321

BLACK OR AFRICAN AMERICAN (n = 992)
306

HISPANIC / LATINO (n = 51)
271

ASIAN (n = 3)
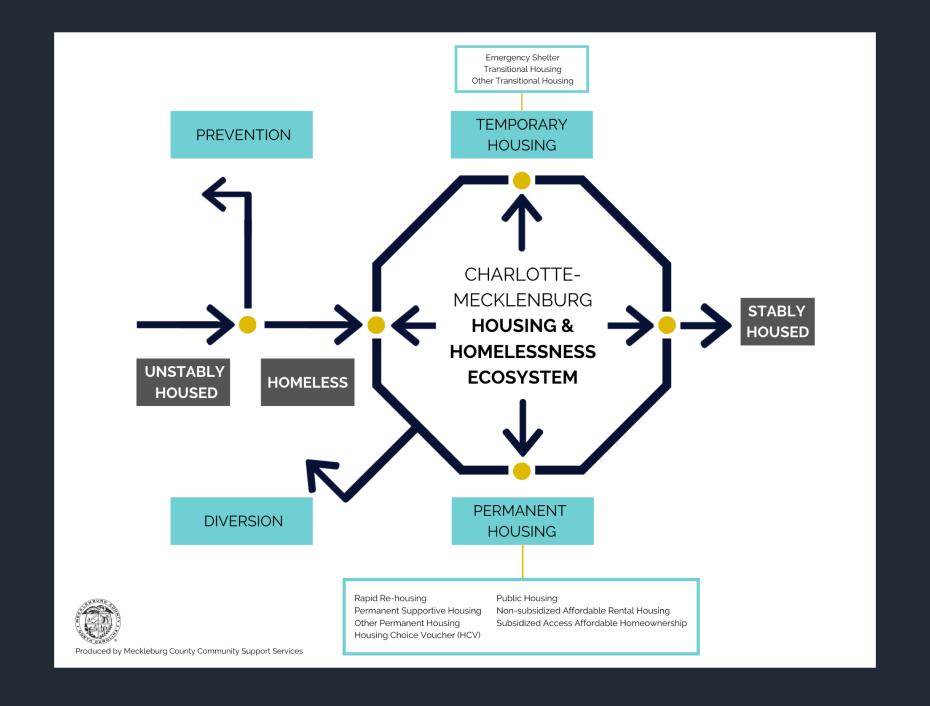166

AMERICAN INDIAN OR ALASKAN NATIVE (n = 4)
59

2

How has Charlotte-Mecklenburg performed relative to this System Performance Measure in comparison with other "peer" communities?

LENGTH OF TIME HOMELESS & OTHER FACTORS
CHARLOTTE-MECKLENBURG AND PEER COMMUNITIES

COC	PEER CITY	PEER CITY POPULATION	COC AWARD	COC PIT COUNT	COC AVERAGE LENGTH OF TIME HOMELESS	COC MEDIAN LENGTH OF TIME HOMELESS	DEFICIT OF AFFORDABLE & AVAILABLE UNITS IN METRO AREA <30% AMI
CHARLOTTE-MECKLENBURG COC	**CHARLOTTE, NC**	**857,425**	**$4,771,863**	**1,742**	**103**	**68**	**41,923**
AUSTIN/TRAVIS COC	AUSTIN, TX	950,807	$10,383,512	2,225	72	37	52,595
COLUMBUS/FRANKLIN COUNTY COC	COLUMBUS, OHIO	878,553	$15,093,005	1,907	56	40	48,462
INDIANAPOLIS COC	INDIANAPOLIS, IN	864,447	$7,066,690	1,567	45	16	52,190
JACKSONVILLE-DUVAL, CLAY COUNTIES COC	JACKSONVILLE, FL	890,467	$5,277,974	1,654	107	49	27,827
NASHVILLE-DAVIDSON COUNTY COC	NASHVILLE, TN	663,750	$3,925,354	1,986	62	18	34,883

3 FOCUS AREA QUESTIONS

1. What factors contribute to the increase in length of time households experience homelessness? What factors prevent the system from decreasing the length of time households experience homelessness?

2. Does the length of time individuals experience homelessness vary by race/ethnicity? Why do you think this might be the case?

3. What is the potential impact on the overall length of homelessness and overall shelter capacity if all "long stayers" were re-housed?

4. What other system changes (prevention, housing, cross-sector supports) can decrease length of time homelessness?

5. Using data from the table, what can be learned from comparing Charlotte-Mecklenburg with peer communities? What can/should Charlotte-Mecklenburg do more of? Do less of?

Emergency Shelter
Transitional Housing
Other Transitional Housing

PREVENTION

TEMPORARY HOUSING

CHARLOTTE-MECKLENBURG
HOUSING & HOMELESSNESS ECOSYSTEM

STABLY HOUSED

UNSTABLY HOUSED

HOMELESS

DIVERSION

PERMANENT HOUSING

Rapid Re-housing
Permanent Supportive Housing
Other Permanent Housing
Housing Choice Voucher (HCV)

Public Housing
Non-subsidized Affordable Rental Housing
Subsidized Access Affordable Homeownership

Produced by Meckleburg County Community Support Services

CHARLOTTE-MECKLENBURG CONTINUUM OF CARE GOVERNING BOARD DATA REPORT

27 MAY 2021

CoC Governing Board
Strategic Plan Worksheet

Board member completing form:
Goal:
1.   What committee and/or workgroup do you participate in?
2.   What progress has been made toward your specific performance milestones?
3.   Are there any challenges toward meeting your performance milestones?
4.   What other support is needed?

Why it matters: PIT/HIC Submission

- HUD requires communities conduct a Point in Time (PIT) annually & this data must be submitted annually
- CoC Governing Charter requires the Board to "vote to approve the PIT/HIC submission"
- This information is used in determining amounts of funding for communities
- Limitations: PIT is just a one-time count of those experiencing homelessness; Charlotte-Mecklenburg uses the One Number, which is a real time count of those experiencing homelessness
- PIT/HIC numbers are shared in the State of Housing Instability & Homelessness report that is released in the fall
- CoC Governing Board will vote to affirm the process that was used in this year's PIT. Moving forward, the Board will vote to approve the process in December. Proposed update to the Charter to reflect this change

Why it matters: Data Quality Standards

- The CoC Board should always make data-driven decisions
- The data used to make decisions should be accurate
- Data Quality Standards hold agencies accountable for ensuring they are entering data timely, completely, and accurately
- Data entry informs our system performance measures
- HUD determines the amount of funding our community receives based on system performance measures
- The Data Advisory Committee will implement the data quality plan through quarterly monitoring of contributing agencies. The results will be shared with the HMIS Sub-Committee & the CoC Governing Board.

Charlotte-Mecklenburg

Homeless Management Information System (HMIS)

Data Quality Standards

Approved by: CoC Governing Board

Date:

Version: 2.0

Introduction

This document describes the Homeless Management Information System (HMIS) data quality standards and the data quality-monitoring plan for Charlotte-Mecklenburg Continuum of Care (CoC). This document is developed for HMIS Contributing Homeless Organizations. These HMIS Data Quality Standards and the related data quality-monitoring plan will be updated annually, considering the latest HMIS data standards.

Development Process

The Charlotte-Mecklenburg Continuum of Care Homeless Management Information System (HMIS) Sub-committee of the Data Advisory Committee developed the following policy standards and subsequent procedures of data usage for all Charlotte-Mecklenburg County HMIS users and user agencies. The data quality standards will serve to maintain or improve the data quality of the data entered into the Homeless Management Information System. All agencies are responsible for maintaining their own compliance with federal regulations as well as any outside applicable regulations such as the Health Insurance Portability and Accountability Act (HIPAA) standards.

Applicability of HMIS Data Standards

This HMIS Data Quality Standards document applies to all HMIS participating agencies located within the CoC, regardless of funding source. No HMIS participating provider is exempt from the standards or process laid out in this document.

What is an HMIS?

An HMIS is a locally administered, electronic data collection system that stores longitudinal person-level information about the individuals who access homeless and other human services in a community. Each CoC receiving Housing and Urban Development (HUD) funding is required to implement an HMIS to capture standardized data about all persons accessing the homeless and at-risk of homelessness assistance system. Furthermore, elements of HUD's annual CoC Program competition are directly related to a CoC's progress in implementing its HMIS.

In addition to CoC Programs, HMIS accommodates the following programs:

- Emergency Solutions Grants (ESG) program
- Housing Options for Persons with AIDS (HOPWA) program
- HUD-VA Supportive Housing (HUD-VASH) program
- Projects for Assistance in Transition from Homelessness (PATH) program
- Runaway and Homeless Youth Management Information System (RHYMIS)
- The Supportive Services for Veteran Families (SSVF) program

HMIS Data Quality and Technical Standards

In 2004, HUD published HMIS Data and Technical Standards in the Federal Register. The Standards defined the requirements for data collection, privacy safeguards, and security controls for all local HMIS. In March 2010, HUD published changes in the HMIS Data Standards Revised Notice incorporating additional data collection requirements for the Homelessness Prevention and Rapid Re-Housing Program (HPRP) funded under the American Recovery and Reinvestment Act (ARRA). The current HMIS Data and Technical Standards can be found at https://www.onecpd.info/resource/1220/finald-hmis-data-standards.

What is Data Quality?

Data quality is a term that refers to the reliability and validity of client-level data collected in HMIS. It is measured by the extent to which the client data in the system reflects actual information in the real world. With good data quality, the CoC can "tell the story" of the population experiencing homelessness. The quality of data is determined by assessing the data for timeliness, completeness, and accuracy.

A data quality monitoring plan is a set of procedures that outlines a regular, ongoing process for analyzing and reporting on the reliability and validity of the data entered into the HMIS at both the project and aggregate system levels. A data quality monitoring plan is the primary tool for tracking and generating information necessary to identify areas for data quality improvement.

What are Data Quality Standards?

Data quality standards set expectations for the quality of data entered into the HMIS and provide guidance to HMIS participating providers on how to capture and enter reliable and valid data for persons accessing the homeless assistance system.

HMIS Software

The WellSky software product, ServicePoint, has been adopted by the Charlotte-Mecklenburg Continuum of Care (CoC) as the official HMIS for CoC providers. For the purposes of this document, HMIS refers to ServicePoint and all modules, assessments, and reporting capacities, standard or customized, contained therein.

Data Quality Standards

The Data Quality Standards for the Charlotte-Mecklenburg Continuum of Care (CoC) are outlined in this plan are applicable to all projects participating in HMIS, with exceptions as noted under each standard. Unless otherwise noted, all participating projects are expected to achieve and maintain the data quality standards; this also includes those projects that are not funded by HUD or other governmental funding bodies. These standards are in addition to those identified by HUD in the HMIS Data and Technical Standards. HMIS Users and program staff should be familiar with both sets of requirements.

Timeliness

Entering data in a timely manner can reduce human error that occurs when too much time has elapsed between the data collection/service transaction and the data entry. The individual doing the data entry may be relying on handwritten notes or their own recall of a case management session, a service transaction, or a program exit date; therefore, the sooner the data is entered, the better chance the data will be correct. Entering data as close as possible to the incident or activity is also essential to the effectiveness of the Coordinated Entry System (CES). It is important for the By Name List generated from HMIS to have accurate data on individuals and households experiencing homelessness and those who have entered permanent housing. Timely data entry ensures data accuracy and ensures that the data is accessible when it is needed, either proactively (e.g. monitoring purposes, increasing awareness, meeting funded requirements), or reactively (e.g. responding to requests for information, responding to inaccurate information).

Data Timeliness Standard

All required data elements for each program type must be entered within three business days of data collection, incident, or activity. This includes intake as well as any client updates that occur during the program stay. Client records must be closed within 3 days of the client exiting the program. When a client is exited from a project in HMIS, they should be exited as of the date they last utilized the bed/services provided by the project. (For example, if a client last received services from a project on 1/10/2021, they should be exited from the project on 1/10/2021, even if the user is doing the data entry on a future date.) This helps ensure clients are not perpetually enrolled in a project in HMIS despite no longer being served, which assists in providing exact locations for clients when trying to house them through Coordinated Entry. If a client returns to a project, a new Entry record should be created.

Stage of Data Entry	Number of Days to Enter Data (including weekends and holidays)
Program Entry	3
Update data during program stay	3
Program Exit	3

Data Completeness

The purpose of completeness is to ensure sufficient data on clients, their demographic characteristics, and service use to facilitate confident reporting and analysis on the extent and characteristics of the homelessness including the following:

❖ Unduplicated counts of clients served within the Charlotte-Mecklenburg CoC
❖ Patterns of use of persons entering and exiting the homeless assistance system
❖ Evaluation of the effectiveness of homeless systems

Data Completeness Standard

All projects participating in HMIS are required to comply with the data standards. Data entered needs to be valid and accurately represent information on the clients being served.

All data entered into the HMIS must be complete. Missing or incomplete data (e.g., missing digit(s) in a Social Security Number (SSN), missing the year of birth, missing information on disability or veteran status) can negatively affect the ability to provide comprehensive care to clients. Missing data could prevent the client from receiving needed services - services that could help them become permanently housed and end their episode of homelessness.

Universal Data Elements (UDE)

The purpose of the UDEs is to ensure that all service providers participating in the Charlotte-Mecklenburg HMIS are documenting the data elements necessary to produce Continuum-wide unduplicated count of clients served. This provides accurate counts for various reporting requirements, including the Annual Performance Report (APR) and the Longitudinal System Analysis (LSA) collected by the U.S. Department of Housing and Urban Development (HUD) , plus other reporting requirements. This also ensures that the CoC has sufficient client data to conduct basic analysis on the extent and characteristics of the populations they serve.

Providers enter UDEs as part of the Entry Assessment. This assessment is available to users following their submission of the client's Entry information that includes which Household Members are participating in the program, the Entry Type, and the Entry Date.

Similarly, Providers enter specific Data Elements as a part of the Exit Assessment once the clients have completed and/or left the program. This assessment becomes

available to users once they have indicated the household members who are leaving the program, the reason for leaving, the destination, and the Exit Date. The Exit Assessment should be completed on the final day in which the clients receives a service or remain sheltered or housed within a program. Clients with an "unknown" reason for leaving often do not return to the program as expected. These clients should have their Exit information recording as close to their last date of participation in the program as possible and should include information collected on or relevant to the date of the Exit Assessment.

Our community is evaluated regularly by HUD on its collection of UDEs. As such, all clients who receive services and have their information entered into HMIS should have complete data for all UDEs. The percentage of all clients served with "null/missing" UDEs or without full and valid responses in the Charlotte-Mecklenburg CoC HMIS should be no higher than the percentages outlined in the table below.

Program Specific Data Elements (PDEs)

As outlined in the HUD Data standards, which Program Specific Data Elements are required is dictated by the reporting requirements set forth by each Federal partner for each of their projects. For the purposes of consistency, elements in the Entry Assessment are required for all projects participating in HMIS in Charlotte-Mecklenburg. This is to ensure all service providers participating in the Charlotte-Mecklenburg HMIS are documenting the data elements necessary to produce the Annual Performance Report, the HUD CoC System Performance Measures, and to ensure the CoC has sufficient client data to conduct analysis on the extent and characteristics of the populations they serve.

The percentage of required data elements identified as 'missing' or 'client doesn't know/client refused' should be no more than 0% to 10% (unless otherwise specified), depending on project type and data element. (See Table below for details.) The Charlotte-Mecklenburg CoC has established an

acceptable range of 'missing' and 'client doesn't know/client refused' responses, depending on the data element and the type of project entering data. The percentages listed in the last two columns represent the maximum percentages allowed.

Providers must meet HMIS data quality standards for each HUD Data Element.			
Data Quality: Personally Identifiable Information (6a)	**Client Doesn't Know/ Client Refused**	**Missing**	**Overall**
Name (3.1) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
SSN (3.2) (% of Error Rate) [All Projects Except ES]	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
SSN (3.2) (% of Error Rate) [ES Projects Only]	Less than or Equal to 15%	Less than or Equal to 10%	Less than or Equal to 15%
Date of Birth (3.3) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Race (3.4) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Ethnicity (3.5) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Gender (3.6) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Overall Score (% of Error Rate)			Less than or Equal to 5%
Data Quality: Universal Data Elements (6b)			
Veteran Status (3.7) (% of Error Rate)			Less than or Equal to 1%

Providers must meet HMIS data quality standards for each HUD Data Element.			
Project Start Date (3.10) (% of Error Rate)			Less than or Equal to 1%
Relationship to Head of Household (3.15) (% of Error Rate)			Less than or Equal to 5%
Client Location (3.16) (% of Error Rate)			Less than or Equal to 1%
Disabling Condition (3.8) (% of Error Rate)			Less than or Equal to 5%
Data Quality: Income and Housing Data Quality (6c)			
Destination (3.12) (% of Error Rate) [All Projects Except ES]			Less than or Equal to 5%
Destination (3.12) (% of Error Rate) [ES/ CE Projects Only]			Less than or Equal to 35%
Income and Sources at Start (4.2) (% of Error Rate)			Less than or Equal to 10%
Income and Sources at Annual Assessment (4.2) (% of Error Rate)			Less than or Equal to 10%
Income and Sources at Exit (4.2) (% of Error Rate)			Less than or Equal to 10%
Data Quality: Chronic Homelessness (6d)			
% of records unable to			Less than or

Providers must meet HMIS data quality standards for each HUD Data Element.			
calculate			Equal to 5%
Data Quality: Timeliness (6e)			
Number of records at entry >= 7 days			Less than or Equal to 5%
Number of records at exit >= 7 days			Less than or Equal to 10%

*Users can find their Data Quality Measurements for Completeness in the CoC APR Report.

Data Accuracy and Consistency

The purpose of accuracy is to ensure that the data in the Charlotte-Mecklenburg HMIS are the best possible representation of reality as it relates to homeless persons and the programs that serve them.

Staff entering information into the HMIS database must enter information as stated by the client. Every project must enter data on clients in the same way over time, regardless of which staff person is recording the data in HMIS. Recording inaccurate information is strictly prohibited.

Data Accuracy

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 programs contributing data to HMIS. Inaccurate data may be intentional or unintentional. In general, false or inaccurate information is worse than incomplete information, since with the latter, it is at least possible to acknowledge the gap. Thus, it should be emphasized to clients and staff that it is better to enter nothing than to enter inaccurate

information. To ensure the most up-to-date and complete data, data correction should be performed once the error(s) is detected.

Consistency

To ensure that data collected and entered into HMIS are consistent across all projects:

A. Every HMIS user will have to complete a new user training on the system, policies, procedures, and protocols prior to receiving access to the system. Current users are required to take an annual recertification course. .

B. A standardized intake assessment as specified by the HMIS Lead must be used by all providers to collect data in a consistent manner.

C. New agencies that join the CoC are required to review and understand all policies and procedures including data quality requirements.

D. Providers will make every effort to record accurate data.

Data Plan Monitoring

The Charlotte-Mecklenburg Continuum of Care (CoC) recognizes that data from HMIS are critical to meet the reporting and compliance requirements of individual agencies and the CoC as a whole.

To ensure that all projects are in compliance with the requirements and expectations outlined in this plan, the Data Advisory Committee will monitor the process on a quarterly basis to identify and resolve any issues that affect the timeliness, completeness and the accuracy of data entry. The results will also be shared with the HMIS Sub-committee and CoC Governing Board on a quarterly basis. All monitoring will be done in accordance with the Data Quality Monitoring Plan.

CoC Committee Updates

5.27.2021

Coordinated Entry Oversight Committee (CEOC):

- **What has the committee/workgroup been focusing on in the past month?**
- We reviewed the new prioritization policy which will roll out on July 2.
- Voting members of the committee met with Khalil Salim at UNCC and Urban Institute to review the coordinated entry evaluation.
- **What support do you need from the Board?**
- If board members are asked to participate in an interview/survey for the CE evaluation, please participate.

Data Advisory Committee (DAC):

- **What has the committee/workgroup been focusing on in the past month?**
- The HMIS subcommittee approved a new HMIS license cost model, which is now being reviewed by the county's finance department. The subcommittee also approved new HMIS data quality standards for the CoC, to be rolled out soon
- The DAC had a special meeting to help develop measures for the NOFA scorecard.
- Approved the PIT/HIC data, which was submitted to HUD yesterday, the 18th
- Continuing to look at inflow and outflow data disaggregated by race and ethnicity each month, and have identified areas where we want to dig deeper, such as returns to homelessness from housing
- Next HMIS Subcommittee meeting is May 26th at 9:30, and the next DAC meeting is June 9th from 10-12.

Equity & Inclusion Committee:

- **What has the committee/workgroup been focusing on since the beginning of the year?**
- The EIC continues to work with the CEOC on our CoC's current Prioritization tool and the administration of it to ensure it is equitable and transparent. Currently the supplemental questions we have created have been approved by the powers that be and will be implemented July 2, 2021! We will monitor and reassess the tool as data is collected.
- EIC has met with the DAC to review the disaggregated race/ethnicity data as well as met to discuss NOFA Scorecard racial measures. The EIC will begin reviewing data on our own through an racial equity lens to develop improvements to the system by making recommendation.
- The EIC worked with BFZ's large city cohort & developed a tool which seeks to identify if BIPOC and PLE are in positions that make decisions in our CoC. We sent out a survey earlier this month to capture these elements. This data will allow us to be intentional in recurring decision makers in an equitable way.
- EIC has charged the CoC board members to explore their individual implicit biases. The hope is that this will prompt conversations and ultimately invoke change.

- We met with C4 Innovations and are in the process of scheduling the PLE focus group, requesting data from HMIS for the data review and scheduling one on one interviews with individuals in leadership/decision making roles.
- **What support do you need from the Board?**
- For all board members to complete the Implicit Bias test for further discussion as well as the Matrix/survey which was sent out.
- **Is there anything else you would like the Board to know?**
- That we will continue to work on ensuring our CoC is equitable in decision making, practices and policies.

Membership/Nominating Committee:

- No update received.

Ranking Committee:

- **What has the committee/workgroup been focusing on in the past month?**
- Developing scorecards for new and renewal projects for upcoming NOFA/CoC funding; partnering with Data Advisory Committee to establish baselines; to be presented to CoC Board at 5/27 meeting for approval.
- **Is there anything else you would like the Board to know?**
- We had a committee member (who served as Vice Chair) resign so we will be looking to replace; currently assessing targeted populations.

Lived Experience Committee:

- **What has the committee/workgroup been focusing on in the past month?**
- Last meeting held May 20, 2021 at 1:00pm.
- Had one new attendee during the last meeting. Still working on increasing engagement with this group.
- Looking to hold the next meeting in person in order to increase participation.
- **What support do you need from the Board?**
- It would be extremely helpful if persons on the Board who hold the seats for Persons with Lived Experience participated in the Committee.
- **Is there anything else you would like the Board to know?**
- The Committee is concerned about individuals who are being discharged from the encampment hotels for bad behavior, back into homelessness. What supports are there that can assist these individuals?
- They are seeing a lack of mental health services among those they are working with as well. How can we increase access to mental health?

CoC Workgroup Updates

5.27.2021

Veterans Workgroup (Housing our Heroes):

- No update received.
- Next meeting May 27, 2021 at 11:30am.

Chronically Homeless Workgroup:

- No update received.
- Next meeting May 24, 2021 at 3:00pm

Training Workgroup:

- The group continues to participate in the Homeless Services Network (HSN) Training/Education Subcommittee meetings held monthly.
- The group has set up a page on the HSN website that provides information regarding education and training opportunities that are available. To show the collaboration with HSN and the CoC, the workgroup would like to have the website linked in the CoC Weekly Digest each week.
- During the last meeting providers who serve the Senior population presented their services.
- The next meeting is May 28, 2021 at 9:00am.

Persons with Criminal Histories Workgroup (PWCH):

- No update received.
- **Workgroup meeting schedule:** 3rd Wednesday of each month at 9:30am.

Homeless Families Workgroup:

- No update received.
- **Workgroup meeting schedule:** 2nd Thursday of each month at 10:00am. The next meeting will be held June 10, 2021.

Homeless Youth Workgroup:

- **What has the committee/workgroup been focusing on in the past month?**
    - The workgroup has been focused on reviewing the data from HMIS and Coordinated Entry regarding homeless unaccompanied youth in our community to make data driven decisions and strategies
    - The workgroup has intentionally utilized the Homeless Youth By-Name List Scorecard to address gaps in service and invite the appropriate stakeholders to the table to address said gaps
        i. By expanding the workgroup, we have been able to expand knowledge of community partners to work towards a well-rounded case conferencing model
    - The workgroup has sent out confidentiality agreements to stakeholders in order to move toward case conferencing of the current 115 youth in HMIS to begin addressing barriers to housing

ii. Case conferencing is set to begin at the next meeting on June 15th at 1:00pm held virtually

ii. Case conferencing is set to begin at the next meeting on June 15th at 1:00pm held virtually