

Connecticut's HMIS Journey and Lessons Learned

Presented by Nutmeg Consulting

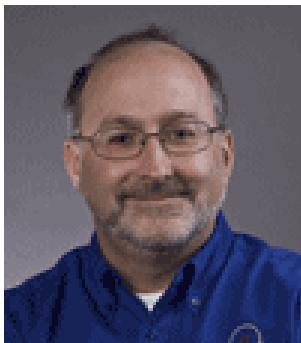


Increasing Capacity &
Building Connections:
Bridging to the Future



About Us

- Nutmeg Consulting has been an HMIS technical consultant in Connecticut since 2006
- Many staff have Non-Profit backgrounds, often users of the HMIS system
- Originally worked with 3 CoCs, gradually expanding to statewide support



Russ Cormier
CEO



James Buckley
Vice President of R&D



What We Hope You Get Out of This

- Examples and approaches
- Inspiration and new ideas
- Cautionary Tales
- A yardstick

Questions Encouraged!



About CT's HMIS System

THEN

- 2 different HMIS systems
- Hodgepodge of non-HMIS compliant solutions

NOW

- 1 Unified Single Vendor Statewide system



About CT's HMIS System

- **Statewide system**
 - All HUD funded providers
 - CT Department of Housing (DOH)
 - Department of Mental Health (DMHAS)
 - Connecticut Veteran's Administration (VA)
 - United Way's 211 Infoline
 - Many other Non-Required Project Types



Organization Structure

- **Connecticut Coalition to End Homelessness (Lead Agency)**
(Manages HMIS from the state, provides data analysis, Advocacy, Funding)
 - **Nutmeg Consulting**
(Technical Development & Assistance, Training, Support, Documentation)
- **Participating Providers**
 - **CT HMIS Steering Committee**
(serve as the decision making body and provide advice and support to CCEH)





About CT's HMIS System

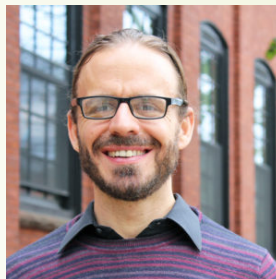


"She was a relentless and fearless leader who never wavered in her commitment to the people who are homeless and poor in Connecticut,"

- Dennis Culhane professor of social policy at the University of Pennsylvania



Richard Cho
Chief Executive Officer



Brian Roccapriore
Director of HMIS



Data Sharing Agreement Basics



- Memorandum of Understanding (MOU)
 - Between Agencies
- **Release of Information (RIO)**
 - Between client and agencies



Release of Information – Old Version

- Several Statewide meetings on the Initial ROI
- Several Draft ROI's, often borrowed from other states
- First ROI Document – **4 Pages of Privacy Text**
- Could Exclude Organizations
- Could share only a subset of data



Sharing Status - OLD

- **Six Choices**

- Full Data Share with ALL participating agencies
- Partial Data Share with ALL participating agencies
- Full Data Share with SOME participating agencies
- Partial Data Share with SOME participating agencies
- I DO NOT WANT to share data with any other agencies
- Refused to sign release



Sharing Status - CURRENT

- **Three choices**
 - Full Data Share with ALL participating agencies
 - Enter Anonymous Client
 - Client Refused to Sign



Release of Information – Current Version

CT-HMIS AUTHORIZATION FOR RELEASE OF INFORMATION

It is up to you whether you want to sign this form. The information you allow us to disclose could later be re-disclosed by the recipient and if that person or organization is not a health plan or health care provider, the information may no longer be protected by Federal privacy regulations. Your decision whether to complete this form will not affect your eligibility for benefits, treatment, payment, or enrollment in other services.

- The Connecticut Homelessness Management Information System (CT-HMIS) is a shared system. This means that authorized CT-HMIS Participating Agencies will enter your information into the CT-HMIS database. These participating agencies will have access to the information that is entered into HMIS. Sharing your data allows service providers to see if they have housing services that fit your needs. It does not guarantee that you will receive housing. The type of information collected in the system includes basic identifying information for you and each member of your household (including name, SSN, date of birth, gender, race, ethnicity, household information, phone number, military veteran status, phone numbers, military veteran status, and disability status). The information entered into HMIS may include information regarding your physical and mental health, including history of substance abuse or HIV/AIDS, whether you are currently receiving services or treatment, and about referrals for services and housing by participating agencies.

A list of participating agencies which will have access to your information is attached. To see a list of participating agencies please go to this website: <http://www.cthmis.com/files/Releas181818> and click the "Download File" button in the middle of the page. Amendments and/or changes are made to this list from time to time. You may request an updated paper copy from The Connecticut Coalition to End Homelessness (860-721-7876) at any time.

NAME (LAST, FIRST): _____ DATE OF BIRTH: _____

I authorize the agencies referenced above to input my information **provided above** into CT-HMIS and to access my information stored there for the purpose of ensuring effective coordination of services. Information entered into or accessed from CT-HMIS will not be used in any way to diagnose or treat any physical or mental health conditions.

- I understand that my information may be used for research, evaluation, and advocacy. This may include research projects that match my needs with other agencies or programs that may assist in getting me housing. I will always be protected by federal and state privacy laws. My personal identity will never be part of any research reports.
- A representative of the **"DESIGNATED AGENCY"** has explained my rights with regard to the CT-HMIS Project to me and given me a written copy of the explanation.
- I can ask to see a document which lists the persons who have updated my client record in the CT-HMIS. If I have any concerns about how my personal data is being used or entered into the CT-HMIS database I can contact **"DESIGNATED AGENCY CONTACT PERSON"**.

I understand that if I need homeless assistance in the future, I will be asked to complete this consent form again.

NOTICE TO RECIPIENT OF CLIENT'S INFORMATION

All or part of this information may have been disclosed to you from records protected by Federal and/or Connecticut state law which prohibits you from making any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by said law(s). A general authorization for the release of medical or other information is NOT sufficient for this purpose. In addition, Federal rules (42 C.F.R. Part 2) restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse cases.

I understand that this form will expire two years from the date I signed it. I may revoke this authorization in writing at any time; however, I understand that revoking it will not change anything about information disclosures that have already occurred.

Client Signature: _____ Date: _____

Print Name: _____

Revised 02/03/2016

CT-HMIS AUTHORIZATION FOR RELEASE OF INFORMATION

Note: If you are a legal guardian or representative, you must attach a copy of your legal authorization to represent the member and complete the following:

Signature of Guardian/Representative: _____
Date: _____

Print: _____ Date: _____
Legal Authority: _____

Agency witness signature _____ Print Name _____ Date _____

If you have any questions or need additional information regarding this form please contact the Connecticut Coalition to End Homelessness at 860-721-7876 or online at cceh.org.



Key Text

“I understand that **my information may be used for research, evaluation, and advocacy. This may include research projects that seek to match my needs with other agencies or programs that may assist in providing housing, case management, or other health and/or homelessness-related services.** I will always be protected by federal and state privacy laws. My personal identity will never be part of any research reports.”



And for Coordinated Access...

“Do we have your permission to release your information into the system that would be shared with the homeless providers in the community?”



ROIs – What We Learned

- Don't Design for Edge Cases
- Aim for as simple as possible
- You pay for more complicated choices down the line
 - In Cost
 - In Time
 - In Effectiveness



ROIs – What We Learned

- Benefits

- Less duplicate clients = Better data
 - *Duplicate Check on client creation enforced*
 - *We also deduplicate in reporting (per HUD guidance).*
- Limited choices make the choice easier
- Broad ROI's allows new approaches to using data as you invent them.
- Holistic view of a client's journey



Data Integration & Reporting



Making Data Easily Available

Self-Host or get Full Read/Write access to your HMIS Database!

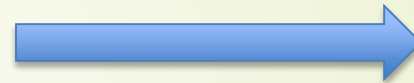
- Hosted – Obtain full read/write permissions on the DB
- Self-Hosted – Own or control almost everything.



Making Data Easily Available

- Hire a SQL Database expert, not just a statistician or data analyst. They are different roles with some overlap!
- They will help you invent new tools and save your bacon several times a year.

Our SQL Guy, Bert





Making Data Easily Available

- **SQL Database Administrators are not cheap and self host is more complex/expensive to manage but...**
 - You can use your own reporting tools against the database
 - They can optimize slow system, if it's slow, it will be used less
 - You can mitigate performance issues with large reports
 - You can copy and manipulate databases with much greater control
 - You can use Triggers, Stored Procedures and custom views to get around software limitations
 - Add Custom Auditing
 - Plug into other data sources without APIs or build new interfaces to your HMIS database.
 - You can troubleshoot your HMIS system almost as well as the vendor (in some cases)



Making Data Easily Available

CT HMIS Alternate Reporting Site (Data Warehouse)

- Nightly Copies of our HMIS Database
- Client level data is anonymized
- Access granted to researchers
 - Steering Committee Approval for studies
 - Business Associate Agreement (BAA)
Used between agencies that share PII data/Electronic Health Record (EHR) data. It holds each other accountable for keeping the data secure and only used for the intended purposes
- Reduces stress of live reporting engines on the HMIS system
- Can be optimized to be easier to use (expanded lists and clearer relationships, “flattening” of data)



How We Get the Most Data Into the system

- Made access to HMIS “Free” for the first 13 years
- Supported non-mandated programs
- Offered Carrots to funders
 - Reduce double entry and provided exports to other systems (DDaP)
 - Provided custom reports to replace aging/poorly maintained reports (DOH ES, RRH)
- Implemented Coordinated Access very early (and made it statewide)
- Provided centralized support and training for the entire state.
- Say “Yes” to partnerships and provide multiple avenues to exchange data.



Sharing Data with Special Populations

- Frequent Users Systems Engagement (F.U.S.E)
 - Cross referencing Department of Correction Reentry and HMIS Shelter Data
 - Create SQL extracted form both systems (Shelter stays from HMIS, length of time in correction facilities) and identify high utilizers from the matched data
 - This is sent to the DMHAS research Group and then clients are awarded housing vouchers and case management
- Social Innovation Funding (S.I.F.)
 - Match HMIS homeless data to state Medicaid data
 - Service level data is extracted from HMIS
 - Send to DSS Medicaid provider where the data is matched
 - Last 2 years of medical claims are pulled
 - Data sent to NYU's research team, targeting high utilizers of shelter and medical care and provide housing, matched with a primary care physician and case management.



Sharing Data in Different Ways

- Domestic Violence Victims

(Special safety and privacy concerns)

- CCA DV (CT Coalition against Domestic Violence) provides coded identifiers
 - Coded Identifier (Masks the person)
 - VERY basic data about the situation recorded (check intake process)
 - Avoid most demographics that could ID the person
 - Ask for a point of contact (CM), Risk priority, Preferred CAN area, VI SPDAT Score, CH status
 - Anonymized client created (Stored Procedure) and added to By Name list for triage
- Integration with the normal Coordinated Access



Sharing Data in Different Ways

Coordinated Access

- One of the few CA efforts that is statewide
- Department of Housing provides the glue to bring together
 - 211 - DOH provides funding to 211
 - CT HMIS - Provides the platform and technical resources
 - Coordinated Access Network - Joint partnership between communities

Each CAN is strongly tied to HMIS, with many providers in the CAN, as well as 211 sharing the same system.



Sharing Data in Different Ways

- Veteran Client Alerts
 - Started as a conversation between CCEH, Nutmeg Staff and Provider
 - Came up with a strategy
 - Special task force alerted to new Vets entering the system
 - Made possible with full database access / ROI



On Data Analysts

- They are essential to understanding your data but...
- Some Analysts tend to take data from your HMIS system and manipulate it in ways that aren't always
 - Transparent
 - Easily understandable
 - Well documented

This creates a “black box” of data, where the underlying structure isn't always clear.

- The best Data Analysts, work within the source and implementing improvements in data collection and cleanup.



Whew....

- Questions?
- Share your own experiences!