



**Houston CoC  
Homeless  
Management  
Information System  
Report:**  
An Assessment of the  
Houston HMIS'  
Preparedness to  
Implement the HEARTH  
Act

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## Executive Summary

In the spring of 2012, Abt Associates completed an assessment of the Houston Continuum of Care's (CoC's) Homeless Management Information System (HMIS). This assessment was part of a broader HUD technical assistance initiative to further prepare the community for the implementation of the HEARTH Act, which also includes work with the CoC on governance, planning, and current HUD best practices (such as centralized intake and performance measurement). At the core of the HMIS Assessment was both on-site and remote communication with Houston's HMIS staff and staff who enter data into HMIS, as well as a thorough review of several key documents, policies, and reports.

Overall, the Houston HMIS is managed consistent with current HUD HMIS Standards, and is well positioned to fully implement the new HEARTH Act requirements and to support the ability of the CoC to meet the new HEARTH performance reporting. Below are some of findings and key recommendations from this assessment.

### Governance

Implementation of the HEARTH Act will include several key changes that will impact each CoC's HMIS, such as: revised Data and Technical Standards, performance measurement reporting, and Emergency Solution Grant participation in HMIS. The ability of an HMIS to have a strong CoC governance structure in place will increase its ability to keep pace with these changes and ensure that all HUD HMIS requirements under HEARTH are met. Houston currently has some governance issues that should be addressed in anticipation of HEARTH, particularly those that will require the HMIS Lead Agency (the Coalition) and the CoC to work closely together to ensure successful implementation and management of their HMIS. An effective HMIS governance structure would engage the CoC in key decisions that impact the HMIS and improve buy-in to the system. Key decisions include the selection of the HMIS Lead Agency, approval of HMIS policies and procedures, selection of the HMIS software, as well as an HMIS Steering Committee that works closely with the HMIS Lead Agency in all of these areas.

During the HMIS assessment for Houston, Abt found that while there is internal supervision of the HMIS by Coalition management and there are contracts with HUD, the City and the County (major funders), there are several gaps in existing governance that, if bridged, would improve the HMIS and improve its capacity and usefulness. Houston currently lacks a community-wide CoC governance structure that sets and approves policy, oversees compliance, measures performance and effectiveness, and makes joint CoC-wide resource decisions.

#### Key Recommendations:

1. Develop a Memorandum of Understanding between the CoC and the Coalition outlining HMIS roles and responsibilities.
2. Get CoC ratification of existing and new HMIS Policies and Procedures.
3. Form and utilize a stakeholder group to support, assist and provide feedback on HMIS policies, procedures, planning and implementation.

### Data Quality

The HEARTH Act will require CoCs to report on a new set of system-level performance measures using data collected in their HMIS. For a CoC to be able to report on any of these measures, they will need to

have excellent program and client-level data quality within their HMIS. In particular, they will need to have: timely data entry for all HUD required data elements, so that they are collecting all required information as soon as possible; complete data that includes information on as close to all people experiencing homelessness in a community as possible; and accurate data in which duplication of clients is extremely limited.

In 2011, the Houston HMIS successfully entered useable data in all reporting categories for the 2011 Annual Homeless Assessment Report (AHAR). This success speaks very highly of the HMIS staff's ability to pass external data quality reviews, and to report aggregate data on the performance of their community's programs.

### **Key Recommendations:**

1. Complete the Data Quality Plan as required in the Proposed HMIS Rules published December 9, 2011 (Section 580.37), and have it reviewed and approved by the CoC.
2. Increase agency data quality monitoring to assure that data entry is consistent and sufficiently accurate for AHAR participation.
3. Increase bed coverage rates in the Transitional Housing and Emergency Shelter categories, to increase the community's ability to report more completely on key HEARTH performance indicators.
4. Document the barriers to increased program participation and strategize with the CoC as to how best to engage these providers in HMIS. If additional assistance is required to work with programs to increase participation, the HMIS should request technical assistance to help with this effort.
5. Develop HMIS rapid entry techniques to reduce data entry overhead and improve data quality for Emergency Shelters and any agency that is **not** required to participate in HMIS.

### **Capacity: Staffing, Budget and Training**

The Coalition employs an experienced HMIS team with an average tenure for HMIS leadership of three to four years. Several HMIS staff worked with a participating HMIS agency prior to joining the HMIS, gaining valuable experience at the end user level. We noted high levels of technical capacity and positive relationships as we interviewed and interacted with HMIS staff and HMIS end users. However, Houston does not have a formal, written Staffing Plan.

At the time of this HMIS assessment, the Coalition was in the process of transitioning new management staff, including a Chief Finance Officer and a new Executive Director, into place. During April/May of 2012, the Coalition staff and Board were in the process of closely reviewing previous budget figures and justification and determining appropriate income and expense projections for fiscal year 2013 (beginning July 1, 2012).

### **Key Recommendations:**

1. Complete an annual review of all HMIS staff job descriptions, and consultant contracts to ensure that they accurately represent all current job functions.
2. Proceed with plans to develop a written Staffing Plan that can drive budget projections and help the board determine necessary funding levels.

3. Develop an annual HMIS plan that lays out the need for the level and type of staffing and activities and use that to do the budget.
4. Continue recent efforts to provide clear budget justifications/narrative to the Coalition Board, so they fully understand their own fiscal responsibility and can support the budget in the community.

## **Conclusion**

The Houston HMIS is ably managed by an experienced HMIS team with the skills and capacity to prepare for and implement new HEARTH requirements. Data quality within the programs participating in the Houston HMIS is good and positions the community well to meet forthcoming HEARTH reporting and performance measurement requirements. However, we do recommend that the community continues to work on the development and implementation of a Data Quality Plan to further increase data quality rates, as well as bed coverage rates for the community. It will be particularly important for the Houston HMIS to include a Monitoring Plan in the Data Quality Plan that will serve as a means of ensuring that data entry is consistent, complete and done in a timely manner. Lastly, it is important that the community design and operationalize both an HMIS and a CoC governance structure that encourages the CoCs participation in key decisions and efforts of the HMIS. )