
New England Regional HMIS Consortium Meeting Minutes, 15 August 2003

Attendees: Brian Smith, VT (chair)
Dennis Tan, ME
Cindy Namer, ME
Dave Dustin, NH
Mary Ann Martel, HUD
Dalia Vidunas, NH
Heather Chiavaras, NH
Christine Lizotte, NH
Richard Rankin, VT

The meeting was held from 10:30 a.m. to 3 p.m. in the conference room at Community Services Council of NH, Inc., Concord, NH.

After introductions, Brian Smith suggested that goals of the group would include:

- to promote regional collaboration in the implementation and operation of Homeless Management Information Systems through information-sharing and mutual support;
- speak with one voice to HUD regarding common HMIS issues.

Brian shared Vermont's model for implementing and managing its HMIS project. A mental health provider had offered to acquire the software licenses and implement the system. Liability concerns drove a subsequent decision to establish the Vermont Human Services Data Corp. (VHSDC), a new non-profit organization, to operate and maintain Vermont's HMIS system. Vermont providers execute an agreement with VHSDC accepting Data Remedies (R. Rankin) as system administrator. A graduated annual fee of \$500 (up to 12 users) or \$750 (>12 users) is assessed. As system administrator, Data Remedies provides periodic trainings, development of some reports, and telephone technical support. The Vermont HMIS system currently networks 15 providers with approximately 60 users, and Brian contemplates that it could double in size over time.

Cindy Namer shared Maine's HMIS model. Maine is implementing Phase I of its HMIS project, which is a 15-agency pilot program in Portland, with one agency linked in Bangor and two agencies linked from the Balance of State. A diversified set of providers were selected for the pilot program.

Phase II will add 42 shelter providers in the Balance of State. Phase III will add all S+C providers in Bangor, plus 3 general shelters operating there.

Dennis Tan discussed the work that his Maine BDS group had been doing in developing another large computer database. Mapping that data into Service Point was an objective. Dennis also described some examples of inter-state cooperation in the areas of Medicaid and other systems. He said that no federal human services agencies have adequate funds to meet all their client intake/reporting needs. He said that the BDS was working with the

Maine state chief information officer to make plans to develop client intake and reporting systems with foresight, because of the high costs involved. Since intake & referral needs tend to be similar, and many human services providers are the same, how do you build a cost-effective framework for sharing data?

Brian said that accurate, systemic client data collection across human services providers would be very revealing. He said, "We are going to be shocked at the value of the services many people are receiving."

Cindy discussed the advantages to the provider community of being able to see good information about a client on intake. She said that a HMIS system would eliminate time wasted "reinventing the wheel."

Dennis said that a HMIS system saves time because the client does not have to provide the same demographic information all the time.

There was general discussion about the benefits of states implementing HMIS on a statewide basis. Richard Rankin said he had learned that Florida and Illinois were acquiring their HMIS software licenses on a county-by-county basis.

Brian discussed the manner in which Vermont was adapting the Service Point software to provide for PATH client intake. The latest release of Service Point was flexible and easy adaptable, he said. Examples of the Vermont PATH intake screen, now in their HMIS system, were provided.

Brian said that the intake screen maps to the PATH APR.

Richard noted that HUD and the U.S. HHS maintain different ethnicity/race definitions, as well as a different definition of "outreach."

Cindy and Brian discussed the work of Doug Tanner, who is a leading proponent of more consistency in the approach to RHYMUS data collection and reporting. They agreed to collaborate on this.

Cindy questioned whether any states had commented on the recently released draft HUD data elements. Brian said he had only heard a comment about full social security numbers within the Vermont community.

Richard pointed out that collection of a client's SS# in HMIS is still optional, but providers are required to ask for it.

Dennis led a detailed discussion of SS#s and unique identifiers, including problems with the development of unique identifiers via computer algorithms.

Brian suggested that the group compile and submit a combined set of comments on the new HUD data elements, on new group letterhead, so that HUD would see that New England's northern tier is speaking with one voice on HMIS issues. The group agreed to share the HUD document with CoCs and request feedback on a fairly short schedule. Cindy

volunteered to consolidate the comments and submit the letter to HUD. Brian's people will design the consortium's letterhead.

Cindy suggested approaching CDBG to solicit funds for projects that would address transportation needs of low-income individuals and families in our rural New England states. She said that lack of transportation to essential services frequently causes persons without cars to relocate to cities near such services. This places a growing burden on homeless service providers in urban areas.

Brian suggested Cindy look into the 5310 Program, which can fund non-Medicaid related transportation for the elderly.

Dalia pointed out that NH is working through a CAP agency to provide such service in Region IV.

The group discussed the outcome of its first meeting, and brainstormed where the inter-state collaboration might lead.

- Cindy offered to make available some software tools that could be helpful in managing discussion and shared document files of interest to the group.
- David Dustin suggested an objective might be a consortium website with FAQs and linked to each state's systems and policies and procedures.
- Dennis suggested that each state inventory its HMIS resources and its informational goals. He offered to supervise the inventory results, and could deal with email or hard copies which could be scanned.
- Brian requested critiques of the agenda to identify those items which still require discussion. He suggested bi-monthly meetings, moving later to quarterly meetings.
- Cindy suggested video teleconferencing, especially during the winter.
- Dalia offered to examine some options for that.
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Everyone expressed their thanks to Dalia and her agency for their hospitality – including lunch.

The next meeting was tentatively set for Friday, 24 October, again at Community Services Council at NH. To relieve the pressure on CSC, David offered to see if lunch could be catered by the NH Office of Homeless & Housing Services