

Summary of June 1, 2010 Changes—ALL USERS AFFECTED IMMEDIATELY!

HUD has been planning to update the HMIS data standards for several years. The standards were partially updated last fall when the HPRP (Homeless Prevention and Rapid Re-housing Program) began in order to implement the updated standards for that new program. However, there were a number of changes that had not been approved at that time. The new complete HUD standards have now been finalized and will become effective as of June 1, 2010.

Some of these changes will require substantial adjustments to your data entry process – there are new questions required, and some existing elements will need to be updated annually (for some programs). Wilder will be conducting webinars to explain these changes in greater detail. We encourage you to attend a [webinar](#) to make sure that you are in compliance with these new HUD requirements.

This document outlines the changes to Minnesota's HMIS mandated by HUD in these new data standards. In addition, the changes to Minnesota funder assessments will also be included in this document. The state changes are usually effective on July 1, but are included here and will take effect on June 1 this year to streamline the change process for everyone.

Our ServicePoint interface will be updated Friday, May 28. Although the site will not be 'down', we ask that you do not enter data into ServicePoint on Friday to give us time to configure the interface to fit our needs. While we expect the site to be ready by Saturday morning, please check the News Flash column – we'll post an announcement that the changes have been completed, so you'll know that your assessments are ready.

New data entry forms and instruction documents will soon be available at www.hmismn.org/forms/.

Timing of Changes on Reports:

HUD: The changes that HUD is requiring as of June 1 are not included on the version of the APR currently available in ServicePoint; the changes introduced last fall are implemented in the current version. HUD is now developing new requirements for the APR that will include these changes. More information from HUD about the APR will be coming in future months. Although the APR you are now using does not pull the new data, you should begin entering the required information as of June 1. When the APR is published, the new data requirements will be included.

Minnesota State funders: The 2009 – 2010 state fiscal year reports will be coming due beginning in mid-July 2010. Most of the new data requirements will not be included on these reports. However, since a couple of these changes require fundamental modifications to our system, some reports may need to be updated, which could affect the reports you run this summer. Some sections of the reports may look a little different, and they may use the data you entered in a different way. We will keep you informed of the changes we make.

Description of Changes to ServicePoint

The new HUD APR isn't available yet, so exact data entry processes may be somewhat preliminary for all funding sources. The HUD APR drives much of how we coordinate data entry requirements across programs so we have a more uniform set of processes, especially for sections like income, disabilities, and exits. When the APR becomes available, we will let you know if additional changes are necessary. The information included in this document is based on the information that is currently available and coordinated with state funders. Please watch for newsletters in the coming months to keep up with changes and clarifications we receive from HUD. We know this transition is difficult and thank you for your effort and patience during this time period.

This document outlines changes you'll see in data entry requirements and reports, as well as the timing of those changes.

Each funding source is listed separately. The fields affected by the changes are listed at the top, followed by a more complete description of each change. Start by reviewing the sections on the Universal Profile, Household Data Sharing Assessment and Exit Assessment. Next, be sure to read carefully and learn the information in the funder assessment sections that affect you; there are some differences in requirements for different funders. You'll need to be ready to start implementing these changes on June 1.

The Universal Assessment is displayed at the end of this document. The changes listed on this assessment is more general, because some requirements are different for different funders, but you may find it useful if you are entering data for programs from multiple funders.

Universal Profile

Fields affected by changes:

- ❖ Gender
- ❖ Race

Gender Transgendered has been added as an official response. Options now include:

- Female
- Male
- Transgendered Male to Female
- Transgendered Female to Male
- Other
- Don't Know: Note that this is to be used when the CLIENT does not know.
- Refused: Note that this is to be used when the CLIENT refuses to respond

Reporting notes: No substantial changes on state funder reports. For the current fiscal year-end reports that will be due in July, these new options will display if they are used.

Race Response option removed: Other Multi-Racial

Reporting notes: No substantial changes on state funder reports. If you've used these options in the past, you will not need to change them; they are accounted for on these reports.

Household Data Sharing: (Useful for ALL funding sources)

This assessment is provided to help you copy information to all appropriate household members

Fields affected by changes:

- ❖ Housing Status

Housing Status New question added to Household Data Sharing Assessment
This question is now required for all clients and for all funders. See the funder specific sections for details on this new data element.

ESGP (Includes RHYA Shelter)

- ❖ Housing Status
- ❖ Does Client have a disability of long duration?
- ❖ Disability sub-assessment
- ❖ Zip Code of Last Permanent Address

Housing Status New question required for all clients, **including children**, at program entry.

Response options:

- Literally homeless
- Imminently losing their housing
- Unstably housed and at-risk of losing their housing
- Stably housed
- Don't Know (Client doesn't know)
- Refused (Client refuses)

Persons who are ***literally homeless*** include people who at program entry or program exit are in one of the following:

- Places not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- A supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing for homeless persons);
- A hospital or other institution, if the person was sleeping in an emergency shelter or other place not meant for human habitation (cars, parks, streets, etc.) immediately prior to entry into the hospital or institution;
- Fleeing a domestic violence situation.

Persons who are ***imminently losing their housing*** include people who at program entry or program exit:

- Are currently housed and not literally homeless, per above definition;
- Are imminently losing their housing, whether permanent or temporary;
- Have no subsequent housing options identified; and
- Lack the resources or support networks needed to retain current housing or obtain temporary or permanent housing.

Examples of imminent housing loss include:

- Being evicted from a private dwelling unit (including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations);
- Being discharged from a hospital or other institution;
- Living in housing that has been condemned by housing officials and is no longer considered meant for human habitation;

Persons who are ***unstably housed and at-risk of losing their housing*** include people who at program entry or program exit:

- Are currently housed and not literally homeless or imminently losing their housing, per above definitions;
- Are experiencing housing instability, but may have one or more other temporary housing options; and
- Lack the resources or support networks to retain or obtain permanent housing.

Housing instability may be evidenced by:

- Frequent moves because of economic reasons;
- Living in the home of another because of economic hardship;
- Being evicted from a private dwelling unit (including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations);
- Living in a hotel or motel not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations;
- Living in severely overcrowded housing;
- Being discharged from a hospital or other institution; or
- Otherwise living in housing that has characteristics associated with instability and an increased risk of homelessness.

Persons who are ***stably housed*** are in a stable housing situation and not at risk of losing this housing (i.e., do not meet the criteria for any of the other housing response categories, per above definitions).

Data Entry Instructions:

- Remember, this question is for ALL clients, **including children**
- Use the household data sharing assessment to answer this question for all household members at one time.
- Begin entering responses to this question for all clients at entry beginning June 1, 2010.
- If a client entered the program before June 1, you do not need to record Housing Status at Entry, but you will need to record Housing Status at Exit.

Reporting Notes:

Current Fiscal Year: This question will not be included on the ESGP report that is due in July 2010.

Next Fiscal Year: It will be added to reports beginning with the first report of the new fiscal year, for the report period 7/1/2010 –9/30/2010.

Does Client have a disability of long duration?

Now required for **all** clients, regardless of age.

This question does NOT require documentation

To help determine if a client is disabled, use these questions as a guideline:

- Do you have a diagnosis of disability or a documented disability that is expected to be of long, continued and indefinite duration?
- During the last 2 years have you been told by a doctor or nurse that you have a disability that is expected to be of long, continued and indefinite duration?
- Do you feel you need to see a health professional about a disabling condition that is expected to be of long, continued and indefinite duration?
- Do you have substantial impairments that affect your ability to carry out daily activities that is expected to be of long, continued and indefinite duration?

If the client's response is yes to any of these questions, it is appropriate to give a "Yes" response to this question.

Data Entry Instructions: Begin recording disability status for all clients (including children) beginning June 1, 2010. You are not required to retroactively enter this data for children who entered the program before June 1.

Reporting Notes:

Current Fiscal Year: No change for the ESGP report that is due in July 2010.

Next Fiscal Year: Beginning with the first report of the new fiscal year, for the report period 7/1/10 – 9/30/2010, the reports will include Disability Status for clients of all ages.

Disabilities sub-assessment

There are several changes to the data entry instructions for disabilities:

1. The disabilities sub-assessment is required for all adults and unaccompanied youth at the start of service.
2. **DOCUMENTATION** is now required for the following disabilities:
 - a. Physical Disabilities
 - b. Developmental Disability
 - c. Chronic Health Condition
 - d. Mental Health Condition

Documentation is NOT required for HIV/AIDS or substance abuse (alcohol or drug abuse).

Documentation includes written verification from a state-licensed professional, such as a medical service provider or a health-care provider, the Social Security Administration, or the receipt of a disability check (i.e., SSDI check or VA disability benefit check). For mental illness, this could be a state-licensed social worker.

3. Disability Determination: New question required by HUD standards. Select "Yes" if:
 - The client has a documented Physical Disability, Developmental Disability, Chronic Health Condition, or Mental Health ConditionOR
 - The client has another disability that does not require documentation.

If the client does not have a disability, there is no need to complete the disabilities sub-assessment.

-
4. Disability Type response option removed: Physical/Medical
 5. New Disability type response option: Chronic Health Condition

A chronic health condition means a diagnosed condition that is more than three months in duration and is either not curable or has residual effects that limit daily living and require adaptation in function or special assistance. Examples of chronic health conditions include, but are not limited to, heart disease (including coronary heart disease, angina, heart attack and any other kind of heart condition or disease); severe asthma; diabetes; arthritis-related conditions (including arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia); adult onset cognitive impairments (including traumatic brain injury, post-traumatic distress syndrome, dementia, and other cognitive related conditions); severe headache/migraine; cancer; chronic bronchitis; liver condition; stroke; or emphysema.

6. New follow-up question required for HUD programs:
 - Currently receiving services or treatment for this condition? (NOT for ESGP)

Summary of Requirements for each Disability

a. Physical Disabilities

1. Documentation of disability is now required. Documentation includes written verification from a state-licensed professional, such as a medical service provider or a health-care provider, the Social Security Administration, or the receipt of a disability check (i.e., SSDI check or VA disability benefit check).
2. A follow-up question has been added: Currently receiving services or treatment for this condition. NOT required for ESGP

b. Developmental Disability

1. Documentation of disability is now required. Documentation includes written verification from a state-licensed professional, such as a medical service provider or a health-care provider, the Social Security Administration, or the receipt of a disability check (i.e., SSDI check or VA disability benefit check).
2. A follow-up question has been added: Currently receiving services or treatment for this condition. NOT required for ESGP

c. Chronic Health Condition

1. Documentation of disability is now required. Documentation includes written verification from a state-licensed professional, such as a medical service provider or a health-care provider, the Social Security Administration, or the receipt of a disability check (i.e., SSDI check or VA disability benefit check).
2. A follow-up question has been added: Currently receiving services or treatment for this condition. NOT required for ESGP

d. HIV/AIDS

1. Documentation is NOT required.
2. A follow-up question has been added: Currently receiving services or treatment for this condition. NOT required for ESGP

e. Mental Health

1. Documentation of disability is now required. Documentation includes written verification from a state-licensed professional, such as a medical service provider or a health-care provider, the Social Security Administration, or the receipt of a disability check (i.e., SSDI check or VA disability benefit check). For mental health, this can be provided by a state-licensed social worker.
2. Two follow-up questions pertain to Mental Health:
 - a. Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently. NOT required for ESGP
 - b. Currently receiving services or treatment for this condition. Also required at entry, exit, and annually. NOT required for ESGP

f. Substance Abuse

A new option that pertains to substance abuse has been added to the Disability Type picklist: Both Alcohol and Drug Abuse. The guidelines for Substance Abuse pertain to all of the following Disability Type options:

- Alcohol Abuse
 - Drug Abuse
 - Both Alcohol and Drug Abuse (new option: Select for new clients who have both alcohol and drug abuse instead of recording them separately.)
1. Documentation is NOT required.
 2. Two follow-up question pertain to Substance Abuse:
 - a. Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently. NOT required for ESGP
 - b. Currently receiving services or treatment for this condition. NOT required for ESGP

Data Entry Instructions:

- **Documentation:** Required for physical and developmental disabilities, as well as chronic and mental health problems. If a client enters June 1 or later and you cannot get documentation for these disabilities, do not enter a record for them in the disabilities sub-assessment.

For clients entered before June 1, 2010, make these changes at the yearly update or when the client exits (if client exits before update): If you cannot provide documentation for a disability, record an end date that matches the start date and change the disability determination to "No." This allows the disability to be reported at entry, but not later.

For instance, if a client's disability start date is 3/1/2008, and you cannot document this disability, when you update the client's record before the APR is due, record an end date of 3/1/2008 to this disability and change the disability determination question to "No".

If a client returns to your program and has disabilities that have been previously recorded, but cannot be documented, put an end date on the disability – record the same date in the end date that you used for the disability start date.

- **New Follow-up questions:** NOT REQUIRED for ESGP. ESGP programs are also **not** required to record a response to the existing follow-up question: Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently.

Reporting Notes:

Current Fiscal Year:

- Reporting Requirement: ESGP reports will continue to include data from the Disabilities sub-assessment only for adults and unaccompanied youth
- Chronic Health Condition: The ESGP fiscal year-end report due in July 2010 will display the new disability type, “Chronic Health Condition” if it is selected. The new follow-up questions will not be included on the state-funder reports.
- Substance abuse: The new option, “Both Alcohol and Drug Abuse” will be included in the fiscal year-end reports, if it is selected.

Next Fiscal Year: The ESGP Reports for the next fiscal year have not been updated. As we respond to these changes, you may see some changes to the disabilities portion of the report.

**Zip Code of Last
Permanent
Address**

Question order changed

Reporting Notes: No change to ESGP reports
