Facilitator:	
Meeting Attendees:	Lee Nelson Weber, Vera Beech, Rebecca Rynbrandt, Cheryl Schuch, Johanna Schulte, Deanna Rolffs Staff: Courtney Myers-Keaton, Sierra Salaam, Daniel Gore (phone), Wende Randall (late), Brianne Czyzio

Time Convened:	1:35	Time Adjourned:	2:55

Approval of Minutes		**November 8, 2018**	
Motion by:	Cheryl	Support from:	Johanna
Discussion			
Amendments			
Conclusion	All in favor by acclamation with no dissent.		

Committee Chair Election	**Courtney Myers-Keaton**
Discussion	

Steering and Executive requested that each committee of the CoC elect a chair, vice chair, and secretary. Vice chair will act if chair is not present, and will help chair develop the agenda. Due to low attendance, elections will be done via email. An initial email will go out for nominations, followed by an email to vote. The suggestion is prior to nominating anyone, we contact them to ensure they are willing to take on the responsibilities.

Action Items	Person Responsible	Deadline

System Performance Measures	**Daniel Gore**
Discussion	

By looking through these measures, the group hopes to make sure they are confident when submitting data, and that they are reviewing it regularly, and that there is a deep understanding of the results so they can effectively evaluate. It was noted that the change in format makes it more difficult to view the data. In the past, there was a lot of time spent with Jim deciding on the format of these reports. Adding background information back in will help inform the conversation.

In addition, the data shared would only need to go back three years because the 2014 and 2015 data can be a distraction. There is not necessarily the ability to look down to the provider level but can create groups to work around that limitation.

Total of Year-Round Equivalent Beds. Includes the beds that were participating in HMIS according to the HIC. Some takeaways, there is moderate fluctuations across categories, especially with PSH. There may be more singles in PSH, thus less beds are being utilized per unit. There has been an increase in ES beds over the past year. There has been a pretty significant increase in RRH over the past year. When including all the beds, other permanent housing programs – like vouchers – are a large section.

Total Clients (unique) by project type – over the year (2018), there are over 7000 unique client records associated with ES projects, including DV shelters. This does not include TH. It does include

vouchers that are classified. Other categories seem fairly flat over the previous years. There may be reasons that data is not being pulled in from the previous years, which may be influencing the results.

There was confusion on why the measures are different on the spreadsheets and on Tableau. If clients are active during the reporting period, they are reported in M1. There are higher numbers because the 7000 is the addition of all the providers and is not un-duplicated across products. This number can be excluded as it is not reliable.

Measure 1: There has been more shelters participating in HMIS. There has been a decline in the average length of time homeless in shelter. Average # of days is 61, median is 29. This tells us that within that group, there are some long-term stayers in shelter that are skewing the average. This is a slight decrease over 2017.

Measure 2: Returns to Homelessness within 2 years: There is not much data as this is only looking at the past few years at whether person returned in 2017, and how long after their exit they returned. There has been an increase in returns from PH over the past few years. This may be because in HMIS the system is capturing more incidents of homelessness. It is hard to determine a trend as of now, but in the next few years the CoC will be able to continue tracking this number.

Measure 3: Total Number of Homeless Persons: number of unduplicated persons in shelter has gone up. Compared with the fact that the length of time is shorter, this may be due to higher turnover. It may be a positive trend that more people are being sheltered. Is this measure most of all affected by system capacity, thus there is an artificial limit? Unless there was an increase in PH resources that were cycling people out of shelter, this number would continue to go up. The inventory is the same in 2017 as 2018. So, the conclusion is that there is quicker turnover. The capacity can be limited by the number of beds available, but an increase can show that people are exiting quicker, hopefully to positive destinations. If the system is maxed out, then all this is showing is capacity.

During this period, there was a significant change in how people were recorded at Mel Trotter. In the past, people were only reported after staying for a certain number of days. This would have a large impact in the 2018 number as the change was made in October of 2017. Going forward, need to keep in mind that providers may not enter 100% of participants into HMIS. There is a work around - the inventory can be split into its own project: numbers that cannot be entered into HMIS. This could be an important conversation, asking projects if they are putting 100% into HMIS and whether they are being put in correctly. The inventory took into account seasonal beds, which are prorated.

Measure 4: Increased Total Income for PH Clients: Leavers from PH have a higher percentage of income increase than stayers. Leavers income increase looks fairly stable from year to year. The stayers have a lower rate of clients who have increases in income. Is it possible to split the visual by earned and unearned income? The System Performance Measures do not include the breakdown. Unearned income can fluctuate based on the KULIS (??). There is a higher number of increases in earned income for leavers, but a decrease for stayers (though the decrease does not change much). There is a significant increase over the years, almost 10 percentage points. Looking at the community,

there are reasons – economy, low unemployment – that can impact this number. Case management can also have an impact. If this were split up via project type, there would be differences. Right now, it is all the adults that exited from TH and PSH. For 2018, 223 stayers and 280 leavers. It would be interesting to look at the income of leavers and stayers of different projects and if this is sustainable within the community. Daniel suggested that we could approach MCHA with changes to these reports and ways that they could be made more useful.

Measure 5: Percentage of first-time homelessness: In the past few years, there has been a decrease in this number. But this is because there is now a reference point as most places are using HMIS. So there is a record if someone entering shelter has been in shelter before. The percentage is going down, not the actual number of persons. This measure is much more accurate than in the past.

Measure 7: Percentage of Successful Exits/Retention: This looks at what providers report as the clients' destination. There are differences based on project. For example, RRH is 90% successful. But ES collects much less data due to the nature of ES. Permanent housing has 95.5% successful exits, RRH was higher in the past and is at 90% this year. Street Outreach reported 41% in 2018. The top 2 categories are RRH and PSH. These both include exits as well as retention. The 5% who exited PH would need to be looked at to see if there was a negative outcome.

The rest of the time was spent looking at larger picture questions:
Has there been any reach out/discussion with KConnect?: They have asked for some data, and the context group will look at what data can be provided to them. Right now, they've looked at ISD, PIT, and APR data. Other questions include: Are there other data that this group can provide to KConnect? Is someone reviewing the data before it is sent to KConnect, to ensure they understand the nuances in the data and understand the context? Are they getting the timeframes that make sense.?

Previously, there were conversations with Salvation Army and others about collecting zip code of last known permanent housing definition. For example, are they coming from out-county?, Are they coming from an institutional setting? This data would be helpful to challenge the assumption that many people are coming from the City of Grand Rapids. The CoC could do this to help inform policies. There is a need to ensure HAP is included in this process. Is there a way to pull data quality/ completion for Coordinated Entry for zip code? Next meeting will include zip code analysis, specifically zip codes are entrance and exit. These two could tell two different stories and could tell where they may be holes in the coordinated entry process if the group looks at areas with low numbers.

Perhaps, next meeting can be spent mapping what is known and not known about the system. And looking at what the group knows HUD system performance measure and other measures. Then to push to reflect and adjust, look at what is going well, what are the challenges, and what to do about those. Perhaps the goal is to walk away with more common understanding of what is and isn't going well, and what this group is going to do about it. The group was initially chartered because there was frustration and tasked with identifying the measures, informing the CoC, and talking to leaderships throughout the community about shifting their programming. The group was also tasked with looking

at how they can inform and improve the system. It seems there are two different tasks of this group. One is to look at the HUD piece: what do the numbers mean and what do they tell HUD? This is very much a drill down, iterative assessment. The other is analysis: what is the information from HMIS communicating, and what are other data points and the board picture communicating? In combination, this can answer questions the CoC has. There needs to be more of a group vision of what this committee is going to do with the data and what they are going to exactly review.

Should any of the system performance measures be made public? It wouldn't hurt to have the data public, especially if it includes caveats. It is important that the data be utilized and publicized. Everything in the system performance measures is very much aggregated so people are not able to drill down to a specific provider. There is a need to have the data in a digestible manner. CoC staff can start putting a dashboard together behind the scenes in a few months, this will include level of context and data that the group wants to share.

Next meeting, the group will discuss reports that can look at whether the CoC and community are 'moving the needle'.

	Person Responsible	Deadline
Adjourn		
Next Meeting: Thursday, February 21, 2019, 1:30-3:00, Heart of West Michigan United Way		