

DATA ANALYSIS MEETING

MEETING MINUTES

April 21, 2022 2:00-3:30

| Facilitator: | Lee Nelson Weber | | | |
|--------------------|---|-----------------|------|--|
| Meeting Attendees: | Alyssa Anten, Lee Nelson Weber, Johanna Schulte, Francisco Calderon, John | | | |
| | Wynbeek, Jessie McCormick, Laura Betts, Daniel Gore, Cheryl Schuch | | | |
| | Staff: Brianne Robach, Courtney Myers-Keaton | | | |
| Time Convened: | 2:02 | Time Adjourned: | 3:02 | |

| Review of Agenda | | | | |
|------------------------|---|----------------|-----------------|--|
| Discussion | - Courtney asked to discuss discrepancies with length of time between the | | | |
| | Longitudinal Systems Analysis (LSA) and System Performance Measures | | | |
| | (SPMs) under item #4 (SPMs) | | | |
| | - The draft HIC can be discussed under item #5 (PIT Count) | | | |
| Amendments | | | | |
| Approval of Minutes | | March 10, 2022 | | |
| Motion by: | John Wynbeek | Second: | Johanna Schulte | |
| Discussion | | | | |
| Amendments | None | | | |
| Conclusion | In favor, motion passes. | | | |
| Data Warehouse Reports | | | | |
| Discussion | | | | |

Discussion

Courtney shared that she has been reviewing different reports in MCAH's data warehouse. She viewed a report that displays outcomes by race, ethnicity, and program type which is not currently available for individuals CoCs. She requested access and can share if/when it is available.

At today's full CoC meeting, Courtney noted that in Stella for FY21 LSA data, the average length of time (LOT) for those in emergency shelter (ES) was 49 days. She asked why this differs from LOT in ES in the SPMs (around 70 days) and Core Demographics Report (62 days). Daniel indicated that Stella can display data by pathways. The number referenced is based on clients who only stayed ES whereas the SPMs and Core Demo data is based on LOT in ES for those staying ES and other projects. Cheryl wondered if a high LOT in ES for families in 2021 and increased number of families in ES receiving another resource impacted LOT calculations as Family Promise saw anomalies in both metrics.

Conversation around how multiple entries and exits could impact LOT data. Shelters may manually group lengths of stay if there is a short gap, but the length of the gap before it is considered a break may differ across shelters. Families moving from hotels vouchers to shelter may impact data as well.

Performance reports in MCAH data warehouse show how different project types performs. Courtney offered to share these reports with the group.

Stella is a visualization tool that breaks data down into different pathways, household types, and more. It is recommended that committee members review the platform when they have a chance.



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Courtney shared that a small group is convening around strategic planning to increase racial equity with the Michigan Coalition Against Homelessness (MCAH). The group will look at race and equity outcomes, outputs, inputs, and strategies to reduce disparities. If interested or want to learn more, connect with Courtney. As work continues, updates will become a standing agenda item. Lee supported inclusion on the agenda as the committee has expressed desire to look at equity figures.

| Action Items | Person Responsible Deadline |
|--|-----------------------------|
| Share outcomes report with group, if available | Courtney |
| Include MI Racial Equity Strategic Plan updates as | Brianne/Lee Starting in May |
| standing agenda item | |
| System Performance Measures | |
| | |

Discussion

Daniel shared that the System Performance Measures (SPMs) are an older report that is required by HUD. The LSA is a newer report for the same timeframe that covers much of same data though some street outreach data is included in the SPMs, but not the LSA. He thinks SPMs will be retired at some point. The group reviewed individual System Performance Measures for FY21 (10/1/2020-9/30/2021).

Measure 1: Length of Time (LOT)

Daniel noted that within SPMs, a stay ends if there is a break of 1+ day. LSA allows for a larger gap of up to 14 days. Determining the policies used by shelters and how they are measuring gaps may further inform this metric.

Measure 2: Returns to Homelessness

This metric uses persons, not households. Cheryl noted that family households have multiple persons which may skew the number and suggested analyzing returns based on households. Lee indicated that staff support for this of analysis is needed as the committee is unable to dig deep given limited meeting time.

Measure 3.2: Change in annual counts

This metrics does not include those who contact Coordinated Entry (CE) or outreach and do not enter another program. Courtney noted that the overall decrease may be attributed to the pandemic as folks were reluctant to enter shelter and substantial funds were present which helped keep people in housing. Recently, staff have heard of increases. In addition, Courtney noted that there have been changes in past few months with a decrease in CERA funds and increase in evictions.

Measure 4: Income Growth

Courtney noted that this metric is included in local CoC Program Competition applications and conversation around the metric and its nuances is occurring. One HUD priority is increasing job opportunities which is on the CoC's radar as they look towards HUD optimization. FY21 numbers were likely impacted by pandemic effects. Jessie noted that the benefits cliff is be a concern for some residents. Conversation around how rental assistance could impact benefits.

Measure 5: First Time Homelessness



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This metric saw a decrease in FY21 which can likely be attributed to COVID and increased funding available in the community. The wind-down of CERA funds, other prevention resources available, and ideas for long-term solutions was discussed at this morning's CoC membership meeting.

Cheryl noted this metric is correlated with flow through the shelter system. Longer lengths of stay in shelter means less folks can access shelter. Courtney noted that the Core Demo report includes those who contacted CE and reported literal homelessness and suggested this could be used in comparison.

Conversation around available prevention data. Data from CERA, ESG, and CDBG are collected by each funding entity. There may not be a set community definition for diversion, but data on diversion funding distributed through Solutions Specialists would be available from Community Rebuilders. Members feel it would be beneficial to communicate the increase in funding and relationship to the decrease in those experiencing first time homelessness.

Cheryl asked if Daniel could support analysis conversations by providing comparison and/or correlation. Daniel indicated that if there was a certain trigger that would raise concerns, he can look out for that. Lee shared that in the past the committee set a standard for 10+% deviation on a quarterly basis as a cause for concern.

If you have thoughts and questions about the SPMs, reach out to staff.

| Action Items | Person Responsible | Deadline |
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| PIT Count Report | | |

Discussion

The Housing Inventory Count (HIC) is the same night as the Point in Time (PIT) Count, 2/23/22. Daniel shared this year's summary document. It does not provide a year-to-year comparison, but he indicated there was an increase in beds for singles adults in 2022 and a decreased in beds for families.

Cheryl asked about the difference between temporary and permanent units/beds for families. She indicated that Family Promise has had a significant change in bed numbers for families since 2021 which may be inaccurately reflected in the HIC if temporary beds were reported as year-round beds. Francisco and Daniel are discussing the reporting. Members noted that communications should be clear that the HIC is a point-in-time count for beds, not an annual count. Staff can provide updated HIC data in May.

Draft PIT Count Report

Brianne overviewed the draft report which was included in the agenda packet. Members asked if a 5year look back should be used instead of 7 years. Agreement to include data for as far back as is reliable.

Lee suggested further conversation around how which data points are the most important to highlight in the report. Daniel suggested inclusion of subpopulation data (veterans, chronic, mental



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| illness, etc.). Johanna asked if members could receive the full data set to review and provide | | | | |
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| comments. Brianne will provide the documents. | | | | |
| Action Items | | Person Responsible | Deadline | |
| Provide HIC data at next meeting | Provide HIC data at next meeting | | | |
| Share PIT and HIC documents | PIT and HIC documents | | | |
| Data Protocol Spreadsheet | | | | |
| Discussion | | | | |
| The group had asked Daniel to review a data protocol sheet and provide definitions and data sources. | | | | |
| Daniel updated the sheet with notes and Q1 data. Lee indicated that the committee is willing to enter | | | | |
| data, but first wanted to ensure common understanding of data sources. Conversation around next | | | | |
| steps; this item will remain on the agenda. Lee and Francisco will discuss the purpose of the sheet. | | | | |
| The spreadsheet could be used to populate the dashboard on the website. Brianne suggested | | | | |
| including whether metrics are included on the dashboard in column k on the sheet. | | | | |
| Action Items | | Person Responsible | Deadline | |
| | | | | |
| Adjournment | | | | |