



Data to Action Training: Using Data Tools to Improve Homeless Service System Outcomes

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Learning Objectives

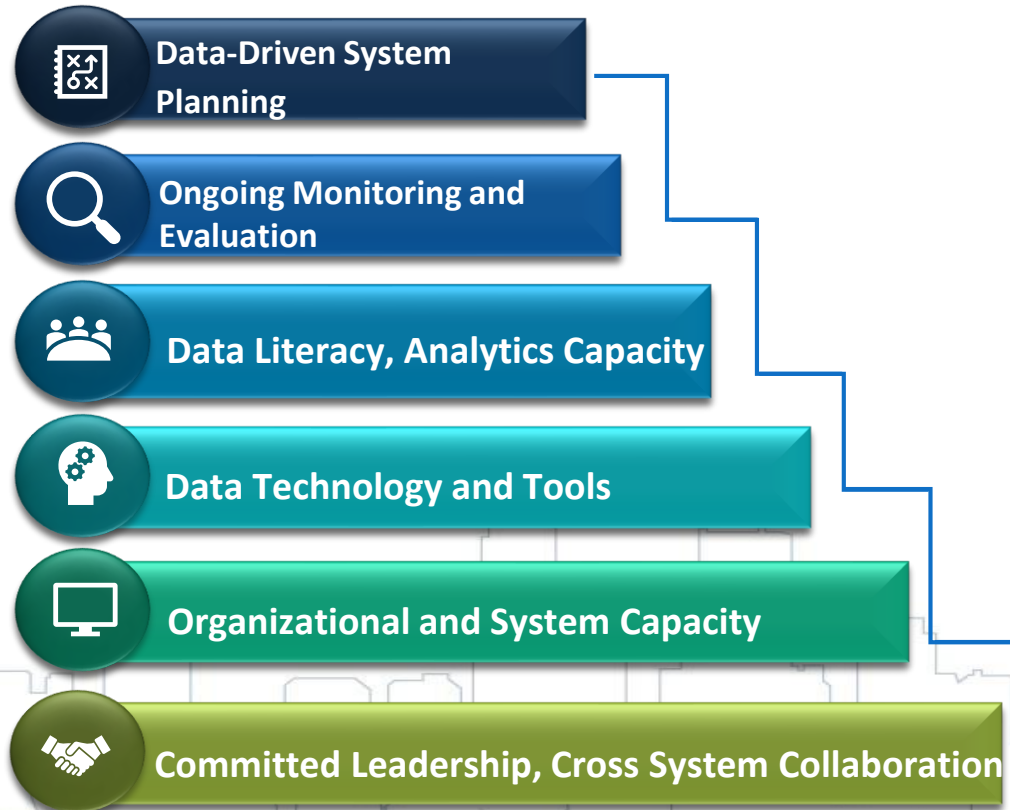
We hope you leave this session with the ability to:

Build capacity to implement data-driven decision making

Learn to probe deeper into data, alongside stakeholders, to
build a performance culture

Understand how to utilize training materials to support
Data into Action cycle

Building Blocks of Data Maturity



*Conditions for
Achieving Federal, State,
Local Goals for Ending and
Preventing Homelessness*



Performance Culture Assessment Exercise

Developing a Performance Culture Self-Assessment Tool



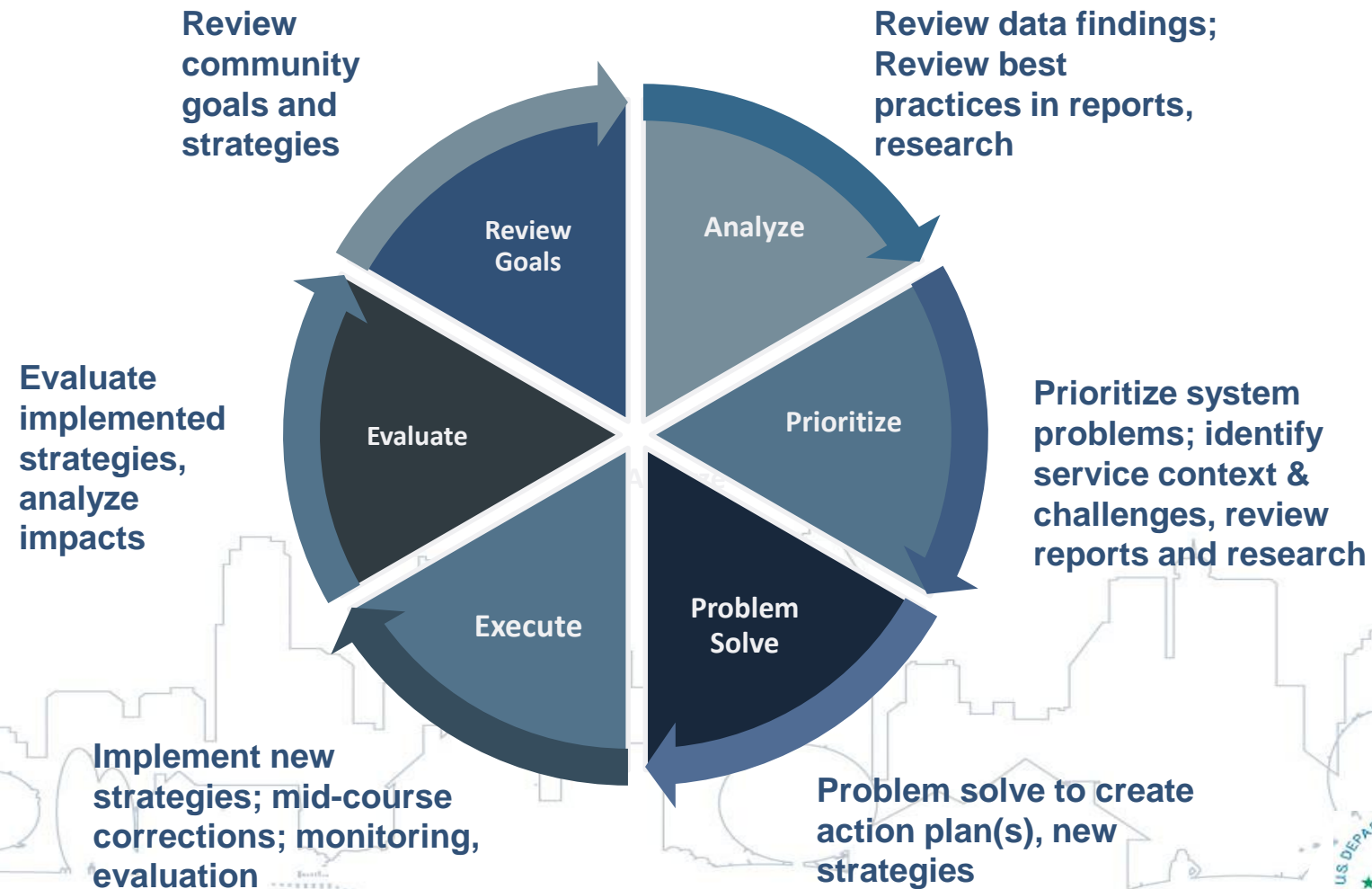
PERFORMANCE CULTURE SELF-ASSESSMENT TOOL

Please indicate to what degree you feel your organization meets these objectives to help make data accessible and useful for all members of the Continuum of Care organization or planning group. Honest answers are encouraged to help shape goals for improvement. **For each question, circle one answer.**

Section 1: Commitment to Data-Driven Decision Making	None	Slightly	Improving	Most of time	All of time
1. Are data reports presented as a learning opportunity to ask questions and determine mid-course corrections?	1	2	3	4	5
2.a. Are data findings presented as reports that incorporate visuals and graphics?	1	2	3	4	5
2.b. Do reports simplify complex data outcomes?	1	2	3	4	5
2.c. Do reports help detect client patterns more easily?	1	2	3	4	5
3. When presenting new data to staff and stakeholders, are trends, constraints and opportunities clearly identified?	1	2	3	4	5
4. Does the planning structure promote the practice of asking critical questions as part of a culture of discovery and open discussion?	1	2	3	4	5
Section 2: Data Sharing to Build a Common Agenda					
6. Are staff members and stakeholders encouraged to be data presenters, engage ownership and communicate findings?	1	2	3	4	5
7. Is meaningful discussion about quality improvement encouraged across a diverse group of stakeholders?	1	2	3	4	5
8. Is an unbiased facilitator used when needed, to ensure discussions stay productive?	1	2	3	4	5
9. Is it clear to staff how data was constructed into evidence to validate system-level successes and shortcomings?	1	2	3	4	5



The *Data to Action* Cycle



Data Exploration Exercise

In Small Groups:

1. Review two data case
Probe data questions
2. Priority-setting exercise
Choose one data case
3. Connect secondary data and
research to data case issue
3. Action Plan exercise
Develop target strategies



Priority Setting Exercise

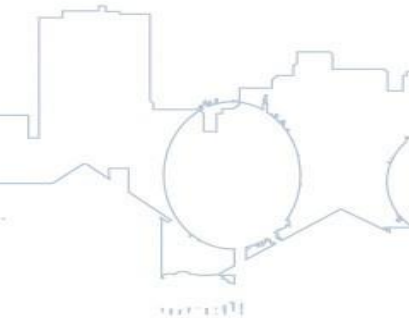
Data Maturity Framework - Priority Setting

Review each of the Data Cases to identify a priority challenge

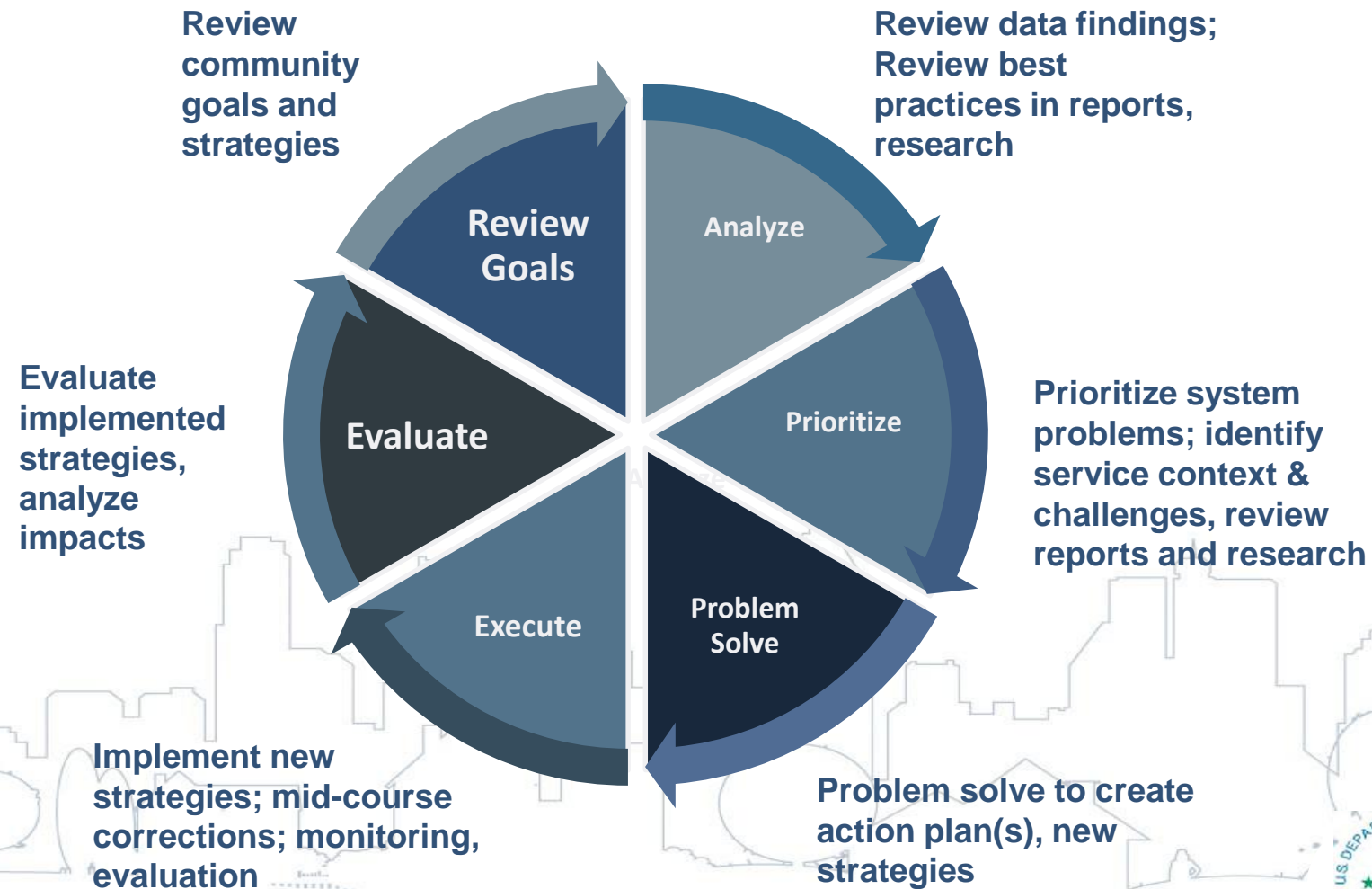
- What contextual factors, resources, and barriers are important to consider when looking at this data?
- Choose a system challenge to prioritize based on the highest feasibility and the highest impact.

Data Case 1:	Rapid Rehousing	
Description of Data Case Problem:	Time spent in shelter before move-in date is greater than 90 days.	
Resources/Tools to Address Problem		Current Barriers and Challenges
Case management Communication links between shelters and Rapid Rehousing		Staff capacity to visit shelters Rapid Rehousing capacity and funding Shortage of landlord connections

Data Case 2:	Youth Homelessness	
Description of Data Case Problem:	Big increase number of youth entering homelessness	
Resources/Tools to Address Problem		Current Barriers and Challenges
Prevention and diversion programs Connections to school district resources		Unaware of current couch surfers Youth wary of working with programs



The *Data to Action* Cycle



Link Secondary Dataset / Research to Data Results

Secondary Data Sources		
Data Source	Description	URL
HUD Homelessness Data		
HUD CoC Homeless Population and Subpopulation Report	Provides PDF PIT Count Data Reports by year at the national, state, and CoC level. Includes multiple tables including data by household type, project type, and population type.	https://www.hudexchange.info/programs/coc/coc-homeless-populations-and-
Housing Inventory Count Reports	Provides PDF housing inventory reports by year at the national, level.	Eviction Lab National, state, and local eviction data in interactive dashboard and downloadable data files. https://evictionlab.org/map
PIT and HIC Data since 2007	Provides Excel spreadsheet data regarding PIT Counts and HIC from 2007 to 2017. Updated annually in November.	National Law Center on Homelessness and Poverty Statistics at the state and city level regarding 1) homeless encampments; and 2) the criminalization of homelessness. Report format. https://www.nlchp.org/
Annual Homelessness Assessment Report (AHAR) 2016	Annual report to Congress presenting key findings of the 2016 PIT count and Housing Inventory Count (HIC) conducted in January. National, state, and CoC-level PIT and HIC estimates of homeless persons, homeless veterans, and homeless children are provided.	HUD Worst Case Housing Needs Report to Congress; 2017 The Department of Housing and Urban Development (HUD) issues its Worst-Case Housing Needs Report to Congress every 2 years, reporting the challenges faced by low-income renter households in finding affordable, good-quality housing. In addition to data on characteristics of renter households and units, HUD's report provides a count of renters facing worst case needs, defined as households who earn less than 50 percent of the area median income (AMI) who do not receive housing assistance from the government, who also are severely cost burdened (spending more than 50% on income on housing costs), and/or live in severely inadequate units. https://www.huduser.gov/portal/publications/Worst-Case-Housing-Needs.html
Health Data		
Kaiser Family Foundation on National Health Issues	Health Data Updates by state on Health Insurance, Medicaid Expansion, and Health Care Disparities	The State of the Nation's Housing 2018 Joint Center for Housing Studies, Harvard University. Annual update http://www.jchs.harvard.edu
Census, Poverty, Labor, Education Data		
County Health Rankings and Roadmaps	Rankings contain county-level data on numerous health indicators and outcomes. Users can compare health statistics between counties.	Census Data and American Community Survey The U.S. census is collected decennially, supplemented annually by the American Community Survey to provide data on demographics, housing, social characteristics, and economic factors. ACS provides summary data tables and downloadable data files regarding general populations in specified geographies; Veteran populations; local, regional and state poverty rates; rates of persons severely rent burdened and/or living in housing cost burden; rates of persons receiving disability; demographic data including distribution of race, ethnicity, etc. http://factfinder.census.gov

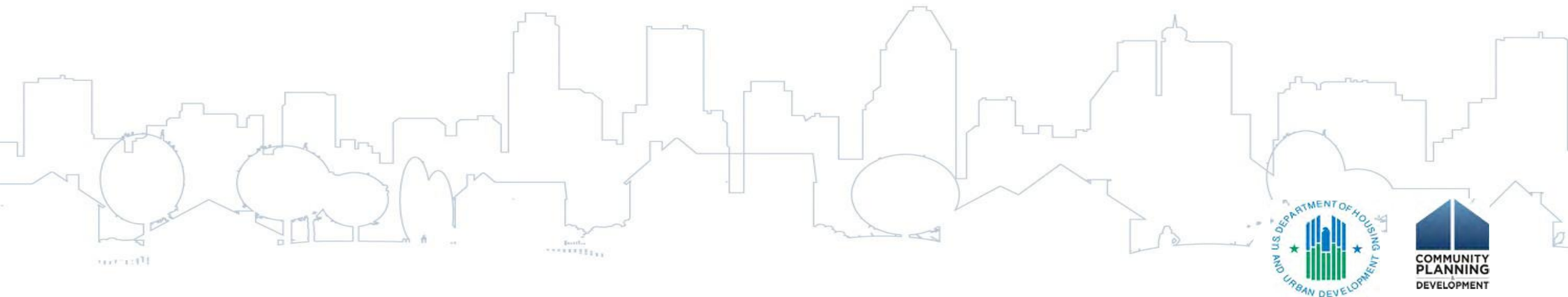


Key Secondary Datasets to Explore

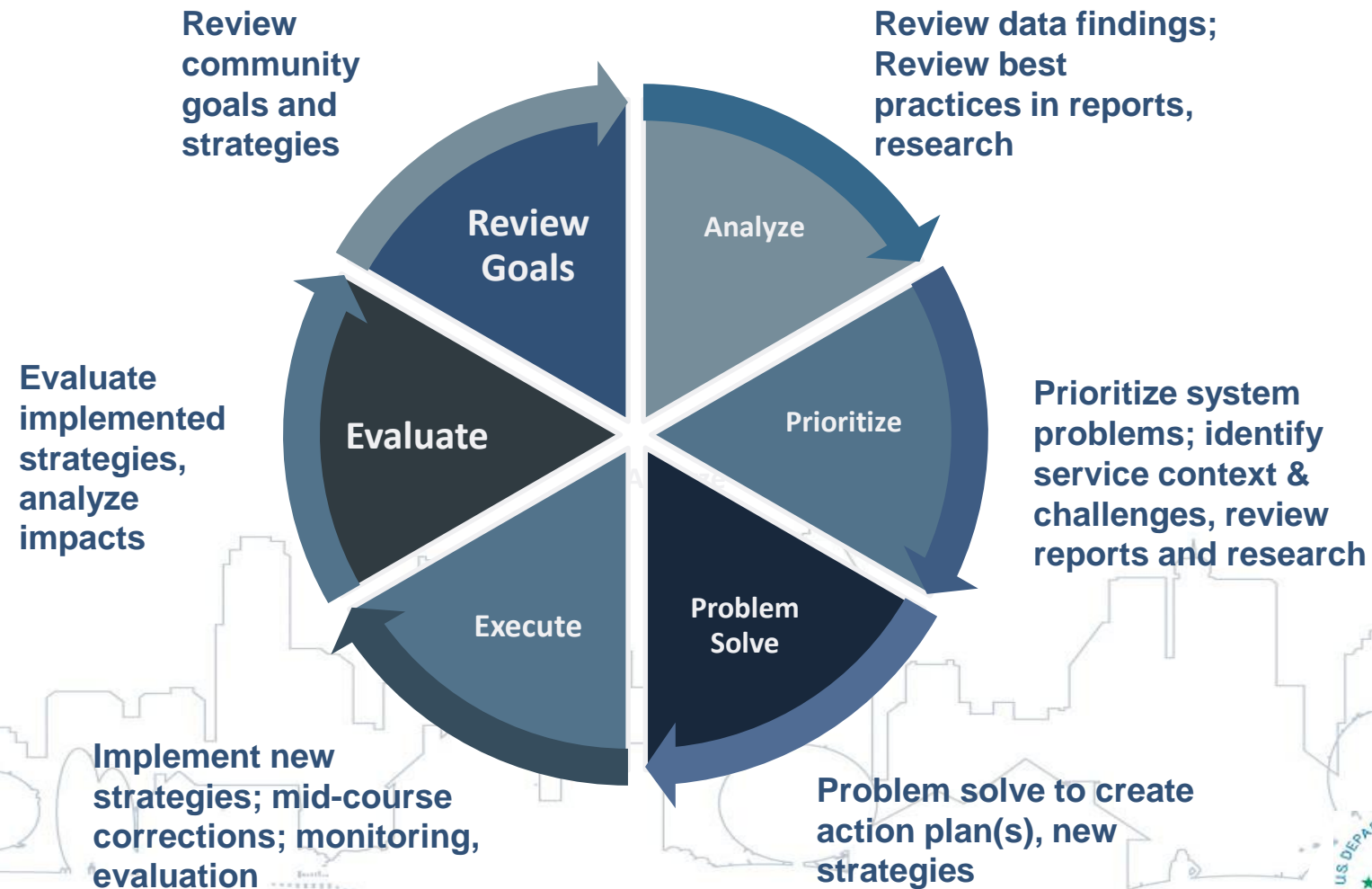
- HUD CoC Subpopulation Reports:
<https://www.hudexchange.info/programs/coc/coc-homeless-populations-and-subpopulations-reports/>
- Eviction Lab: <https://evictionlab.org/map>
- American Community Survey Census data:
<http://factfinder.census.gov>

New Primary Dataset: Stella

- Beginning in the Spring of 2019, HUD will have more robust, dynamic and visual data sets available through the HDX 2.0 website
- In late 2018, early 2019 CoCs submitted ***Longitudinal System Analysis (LSA)*** data, which replaces the traditional AHAR submission process done through HDX
- LSA data can then be leveraged to do system planning and modeling efforts through the use of HUD's new ***Stella*** tool, which will include Performance (P) and an System Modeling (M) sections



The *Data to Action* Cycle



Priority Set to Rapid Re-Housing – Explore Research

Literature Review: RRH and Health

Timing and Duration of Pre- and Postnatal Homelessness and the Health of Young Children

Megan Sandel, MD, MPH,^a Richard Sheward, MPP,^a Stephanie Ettinger de Cuba, MPH,^b Sharon Coleman, MS, MPH,^c Timothy Heeren, PhD,^d Maureen M. Black, PhD,^e Patrick H. Casey, MD,^f Mariana Chilton, PhD, MPH,^g John Cook, PhD, MAEd,^a Diana Becker Cutts, MD,^h Ruth Rose-Jacobs, ScD,^a Deborah A. Frank, MD^a

OBJECTIVES: Prenatal homelessness is associated with elevated risks of adverse neonatal outcomes. How the timing and duration of homelessness during pregnancy and/or a child's early life relate to postnatal child health is unclear.

abstract



Does timing/duration of homelessness determine child health outcomes?*

Study interviewed 20,571 low-income caregivers of children <4 years old in urban pediatric clinics and/or emergency departments in 5 US cities. 661 (3.2%) reported homelessness prenatally only, 758 (3.7%) reported homelessness postnatally only, 729 (3.5%) reported homelessness both prenatally and postnatally (89.6% were never homeless).

Results: data showed 2 harmful associations of homelessness with child health and development: timing and duration of homelessness.

Conclusion: Study reveals both the developmental timing and postnatal duration of homelessness may compound the risk of negative child health outcomes. **Thus, there is no safe time during early development for children experiencing homelessness.***

*Source: Sandel, M., Sheward, R., de Cuba, S. E., Coleman, S., Heeren, T., Black, M. M., ... & Rose-Jacobs, R. (2018). Timing and duration of pre-and postnatal homelessness and the health of young children. *Pediatrics*, 142(4), e20174254.

How Can Recent Evidence Point to *Solution Strategies*

“Homelessness during pregnancy or childhood should be unthinkable”

*“Pediatricians and health systems are in an ideal position to link families to the right community resources tailored to their individual needs, investing in and using crisis response resources when necessary but also preventing eviction through preemptive legal or financial services to keep families from becoming homeless in the first place.”**

Interventions that are used to rapidly house children and families are associated with reduced risk of poor birth and child health outcomes.

*Source: Schickedanz, A., & Chung, P. J. (2018). Addressing Family Homelessness in Pediatrics: Progress and Possibility. *Pediatrics*, 142(4), e20182328.



Priority Set to Elderly Populations – Explore Research



Literature Review: RRH and Health

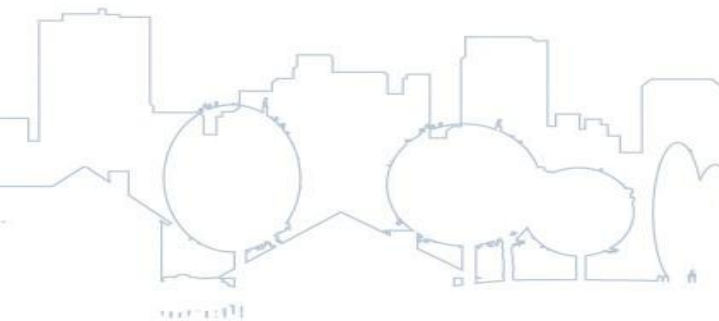
A Data-driven Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness in New York City

Authors: Dennis Culhane, Dan Treglia, Randall Kuhn, Kelly Doran, Eileen Johns, Maryanne Schretzman

With support from the Los Angeles County and Boston study teams: Stephen Metraux and Tom Byrne.

I. INTRODUCTION

Homelessness is increasingly understood as a public health problem as a growing body of research cements the relationship between housing instability, health crises, and increased health care utilization (Hwang, 2001). Mortality rates among homeless adults are more than double those of the general population, and there is burgeoning evidence that suggests a revolving door between homelessness and hospitals. In addition, the barriers to accessing preventative and primary care while homeless lead to receipt of health care only when morbidities are more acute (Kushel et al, 2006, Reid, Vittinghoff, & Kushel, 2008, Lim et al., 2002), meaning that there is a disproportionate use of inpatient hospitalization and other costly medical and behavioral health services among persons experiencing homelessness (Kushel et al., 2002; Salit, Kuhn, & Hartz, 1998; Hwang et al., 2011; Doran et al., 2013). As a result, homelessness is expensive for health care systems and for society as a whole (Latimer, Rabouin, & Cao,

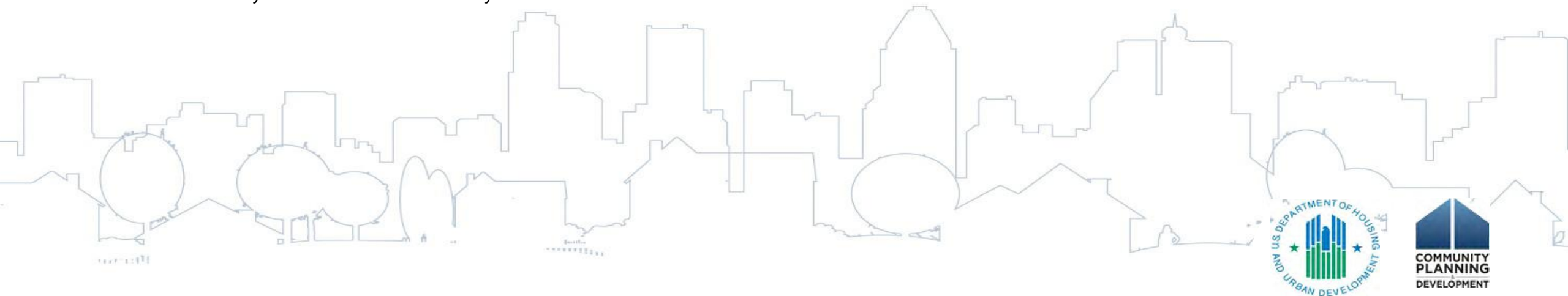


The Aging Population Cohort Effect*

Recent evidence documents a cohort effect in the single adult homeless population, wherein persons born between 1955 and 1964 have faced a disproportionate risk of homelessness over the past two decades.

Persons in this cohort are now between the ages of 49 and 60
Existence of this cohort effect means that there is likely to be substantial growth over the next decade in the number of older adults experiencing homelessness both locally and nationwide.

*Source: A Data-driven Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness in New York City. D. Culhane et al. January 2019.



Aging Population: Cluster Analysis*

	Shelter Days	Inpatient Days	ED Visits	Nursing Home Days	Shelter Cost	Health Services Cost	Total Services Cost
Cluster 1	44	3	1	9	\$5,167	\$13,369	\$18,536
Cluster 2	196	4	2	6	\$23,018	\$15,870	\$38,888
Cluster 3	329	3	1	3	\$38,638	\$10,281	\$48,919
Cluster 4	9	51	10	32	\$1,075	\$175,437	\$176,494

Table IV-1: Summary of shelter and health care use

The service use patterns for these groups correspond to three widely used housing interventions. Each has been used in practice with older homeless adults, although evidence on effectiveness varies. The largest group, Cluster 1, encompassed approximately 85% of the sample and used modest amounts of shelter and health care services. Compared to Clusters 2, 3, and 4, they are most likely to be able to live in community-based independent housing, with minimal supports. To the extent that any housing

*Source: A Data-driven Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness in New York City D. Culhane et al. January 2019.



Aging Population: Housing Models/Cluster*

<u>Intervention</u>		<u>Annual Housing Cost</u>	<u>Annual Service Cost</u>	<u>Total Annual Cost</u>
Cluster 1	Self-Resolve + Subsidy,	\$4,795	\$1,650	\$6,444
Cluster 2	PSH	\$15,468	\$11,500	\$26,968
Cluster 3	PSH	\$15,468	\$11,500	\$26,968
Cluster 4	PSH + Additional Supports	\$15,468	\$23,000	\$38,468

Table IV-2 – Cluster Groups, Corresponding Housing Models, and Related Costs

*Source: A Data-driven Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness in New York City. D. Culhane et al. January 2019.



Aging Population: How Does Recent Evidence Point to *Solution Strategies*?

Cluster #	Estimated % of Aging Population (49-60)	Projected Housing Model Intervention *
1	3% (Highest needs)	PSH plus intensive supports
2 & 3	13% (Next highest need)	PSH
4	85%	33% self-resolve 22% RRH 22% Shallow Subsidy 22% Traditional Housing Voucher

*Source: A Data-driven Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness in New York City. D. Culhane et al. January 2019.



May every Data to Action process reveal an *Actionable* Data Story

Take-home Tools:

- Performance Culture Assessment
- Knowledge Sharing Briefs
- Priority-setting / Action Plan
- Secondary Dataset Sources
- Go to Data Training website:

<https://hmisd2a.wordpress.com/>

data



insight



narrative



data
story



Data to Action Training - URL



Data to Action

<https://hmisd2a.wordpress.com/>

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Welcome to the D2A web portal

Here you'll find links to valuable materials related to transforming data into action: Data to Action (D2A) Trainings, D2A Community of Practice presentations and a Resource Compendium of all webinars, toolkits, and literature shared in the D2A Trainings and the D2ACoP.



D2A Trainings



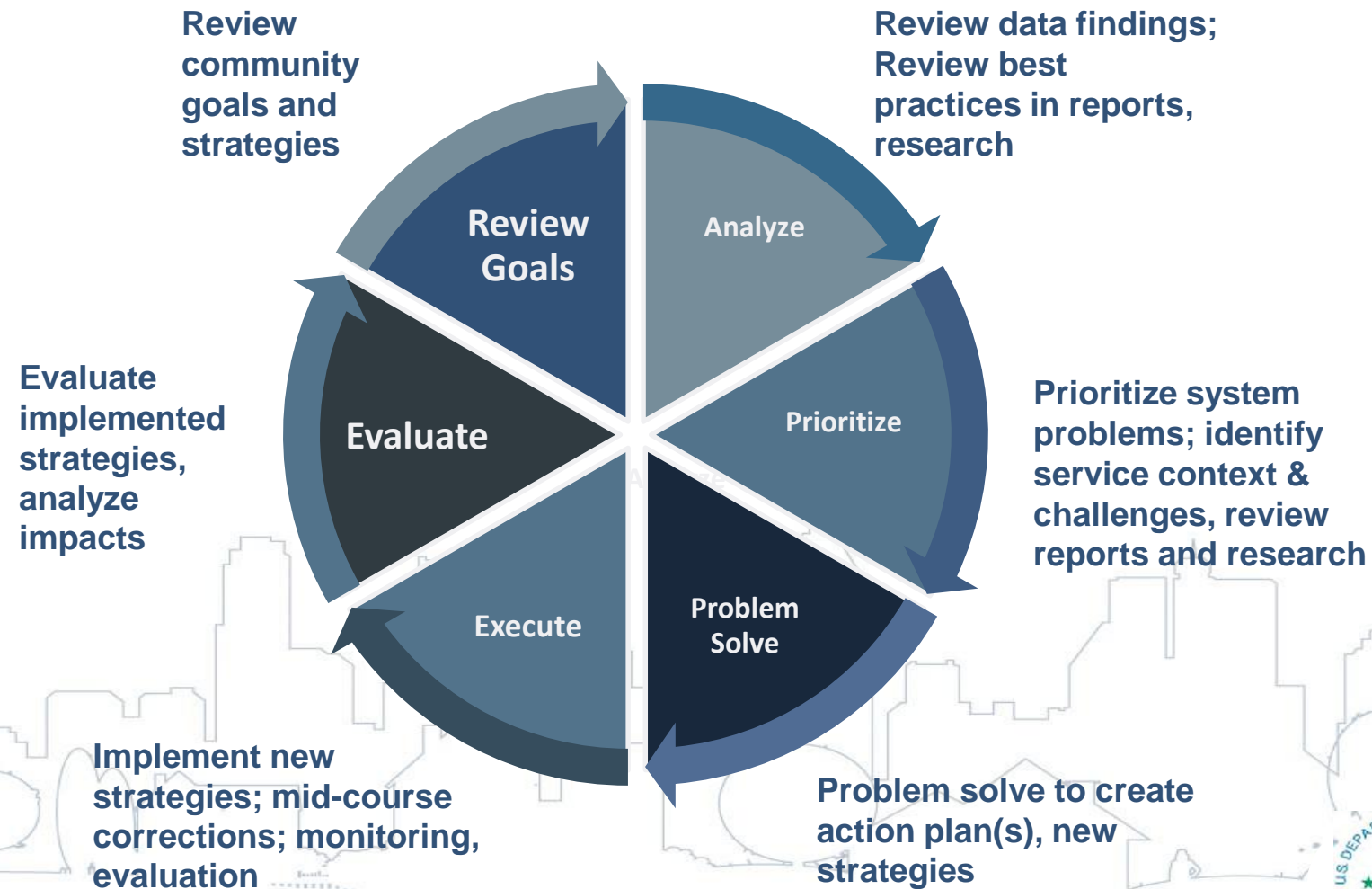
Community of Practice



Resource Compendium

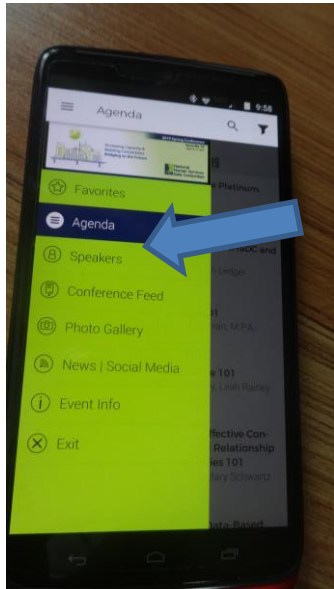


The *Data to Action* Cycle

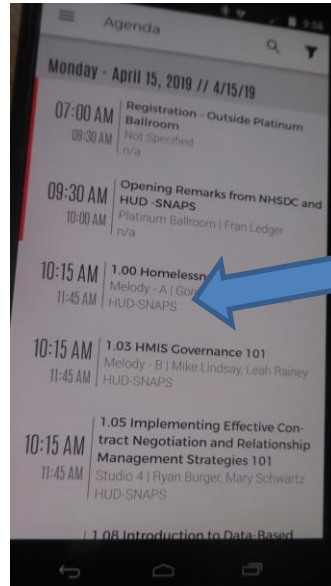


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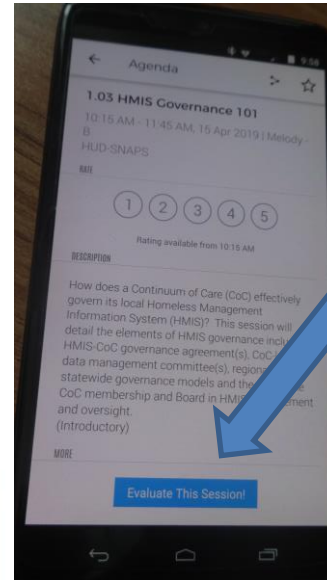
1) Select “Agenda” from the navigation menu.



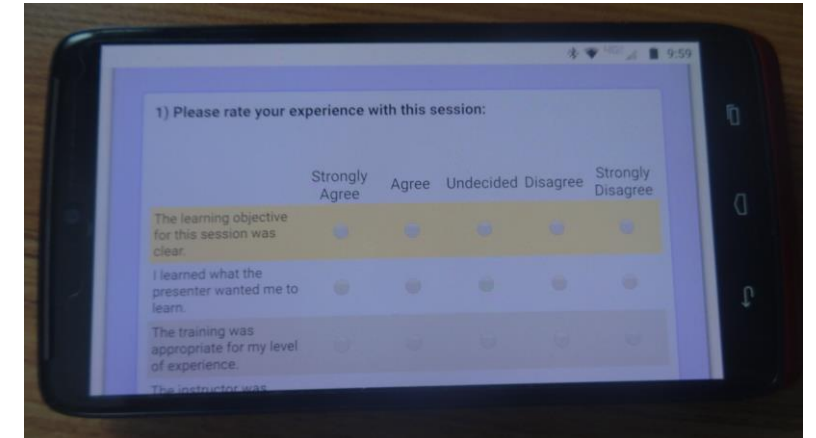
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3) Select the blue “Evaluate This Session”.



4) Complete the Evaluation and Select “Finish”.



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