SNHCoC External Monitoring Year 2

2020 Annual Report by the Strategic Progress Team to the MWG and CoC Board



Presented by:

Dr. Justin S Gardner, PhD

Founder & CEO

Innovative Research and Analysis LLC

Anchor partner of Strategic Progress, LLC

Outline for Presentation

- Goals for Presentation
- Review of Year 1 Recommendations
- Purpose and Need
- Year 2 Process for External Monitoring
- Year 2 Results from External Monitoring
- Year 2 Lessons Learned
- Recommendations and Proposed Year 3 External Monitoring
- Q&A



Presentation Goals

- Goal 1: Update the MWG/CoC Board concerning the process and results from Year 2 External Monitoring
- Goal 2: Discuss Lessons Learned from second year of monitoring
- Goal 3: Field and respond to questions from MWG/CoC Board related to External Monitoring
- Goal 4: Outline Year 3 process, approach, and timeline
- Goal 5: Present Recommendations for Year 3 External Monitoring



Review of Year 1 Recommendations

Accomplished

Partially Accomplished

In Progress

Recommendation 1: Incorporate Housing First compliance by deploying HUD Housing First Tool as part of monitoring activities.

Recommendation 2: Task the Coordinated Entry Working Group to determine parameters upon which to measure Coordinated Entry compliance and provision of reports to be included in monitoring tool scoring.

Recommendation 3: Task the HMIS Working Group to determine parameters upon which to measure provider usage of HMIS. These determinations should include elements such as:

- Consistent HMIS usage expectations as it pertains to client information on profile and program enrollment screens, especially those agencies that use other databases for client management and case notes
- Development of clear guidance to be given to providers (perhaps at PADL meeting)
- Mechanism to ensure that providers can acknowledge understanding of expectations (perhaps signed form)
- Developed parameters for monitoring should also include identification and provision of reports for inclusion in monitoring tool scoring.

Recommendation 4: Deploy the v3 Performance Monitoring Report in lieu of the v2 version used in Year 1.

Accomplished

Review of Year 1 Recommendations Cont...

Partially Accomplished Recommendation 5: Task the Monitoring Working Group to review the current monitoring tools along with Housing First, Coordinated Entry and HMIS Compliance to assess scoring parameters.

Partially Accomplished Recommendation 6: Task Monitoring Working Group in collaboration with External Monitoring Team to create weighting parameters for all new and existing scoring elements as recommended from Year 1 results.

Accomplished

Recommendation 7: Task Monitoring Working Group and External Monitoring Team to work with HomeBase toward improved continuity between application, monitoring, and scoring & ranking processes.

Accomplished

Recommendation 8: Task External Monitoring Team in collaboration with the Monitoring Working Group to standardize tools, reporting, scoring procedures, communications, and processes across ESG and CoC-wide.

Partially Accomplished Recommendation 9: System-wide recommendation to finalize and provide clear consistent written standards for ESG and CoC programs.



Annual Report: Purpose and Need

- From a best practice perspective, external monitoring allows for more standardization and unbiased, objective monitoring and reporting.
- The External Monitoring Team conducted monitoring and audit oversight activities, which:
 - Retrospective Assessment;
 - Proactive issue identification and correction;
 - Develop standardize monitoring tools and processes.
- In total there were:
 - 22 ESG programs monitored for period 1 January 2018 30 June 2019 across 11 providers and
 - 31 CoC programs monitored for period 1 July 2018 30 June 2019 across 11 providers.

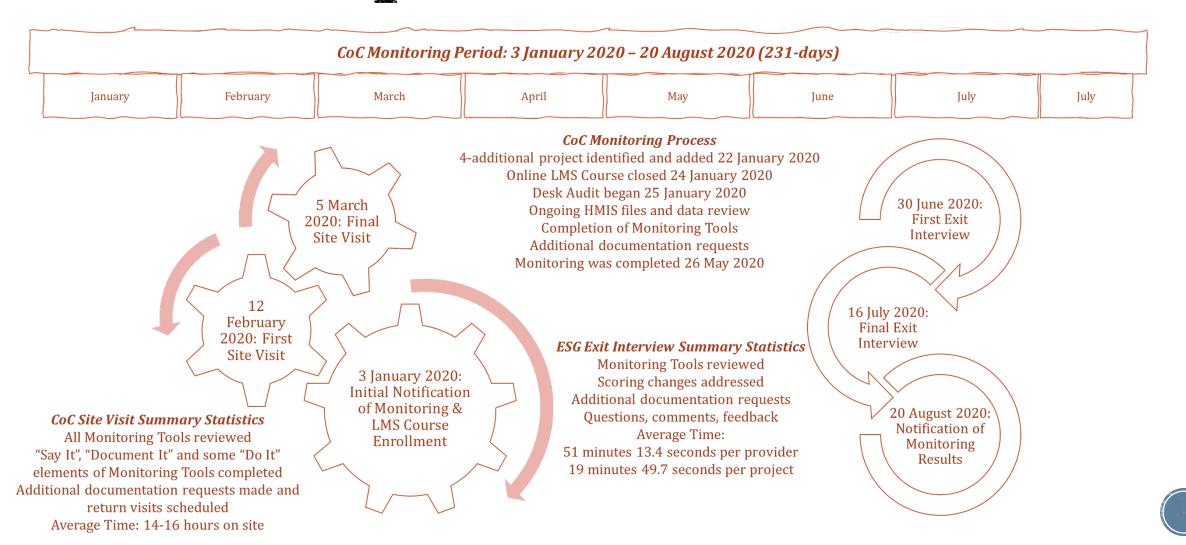


Annual Report: Year 2 Process

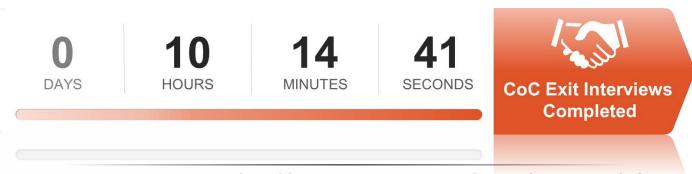
- Separate ESG & CoC monitoring schedules with standardized tools and processes (inperson vs. virtual site visits)
 - CoC desk audits and in-person site visits
 - ESG virtual site visits and desk audits
- Tool modifications made to the tools based on recommendations from Year 1, resulted in more comprehensive and comparable monitoring results with increased emphasis on objective, measurable tools.
- Official communications were sent to schedule monitoring visits and to summarize monitoring results. Program specific communications were on-going throughout as needed.
- From a holistic overview, the SNHCoC Monitoring Process is a standardized, yet adaptable process.
 - Results indicate improved outcomes;
 - Targeted provider-specific and/or program-specific recommendations;
 - Improved potential to bring increased funding to our community in annual funding award decisions (HUD moving to include monitoring as a measure for award decisions).



Annual Report: Year 2 Results CoC



Annual Report: Year 2 Results CoC Cont...



CoC Exit Interviews were conducted from 30 June 2020 to 16 July 2020 lasting a total of 10 hours, 14 minutes, and 41 seconds.



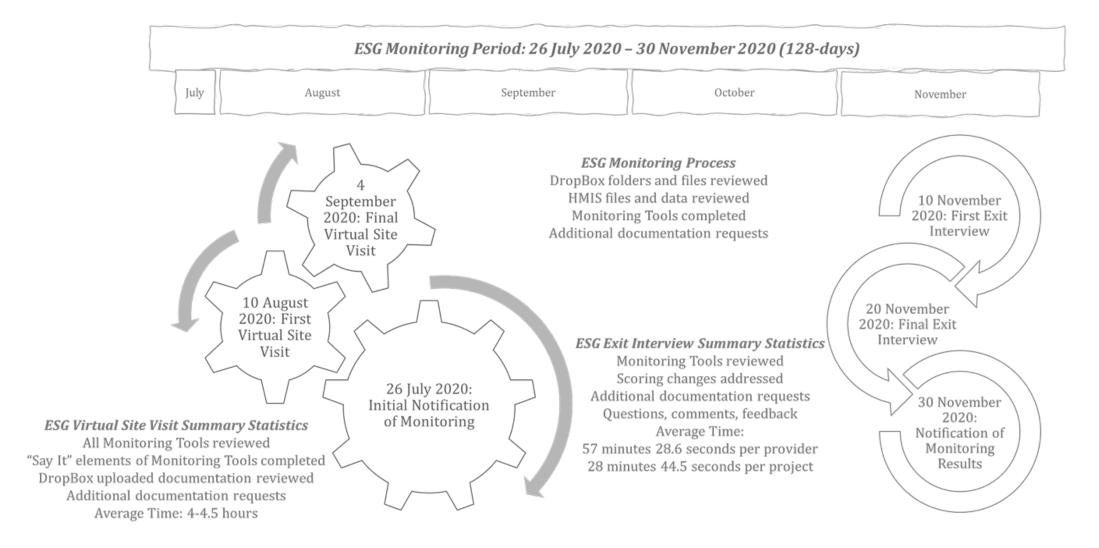
There were 12 CoC Exit Interviews for 11 Providers with one exit interview including two providers pursuant to subcontracting agreement. Several of the CoC providers administered more than one program. The CoC Exit Interviews lasted an average of 51 minutes and 13.4 seconds per provider.

In Year 2, there were 31 funded CoC programs across the 11 providers. The CoC Exit Interviews lasted an average of 19 minutes and 49.7 seconds per program.





Annual Report: Year 2 Results ESG



Annual Report: Year 2 Results ESG Cont...

O 10 32 10 SECONDS ESG Exit Interviews Completed

ESG Exit Interviews were conducted from 10 November 2020 to 20 November 2020 lasting a total of 10 hours 32 minutes and 10 seconds.



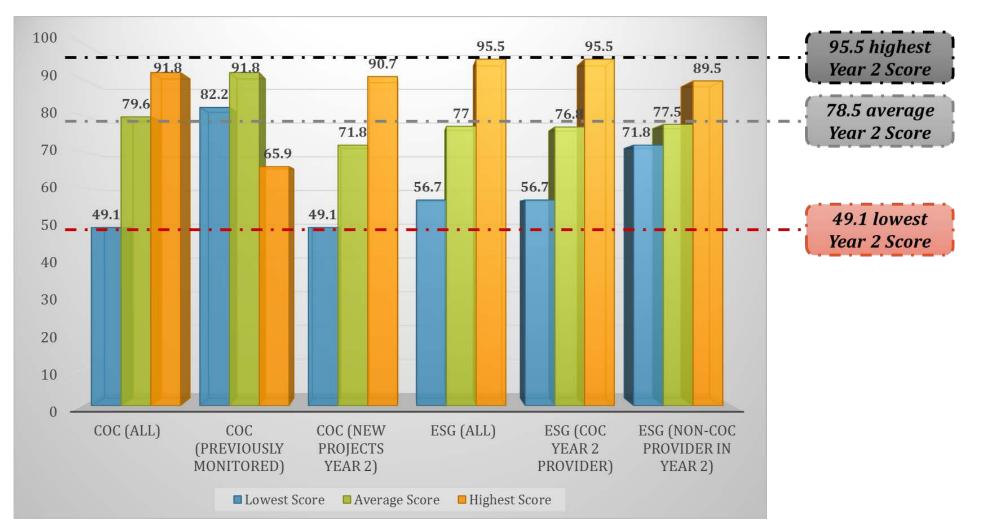
There were 11 ESG Providers several of which had more than one ESG funded program. The ESG Exit Interviews lasted an average of 57 minutes and 28.6 seconds per provider.

In Year 2, there were 22 funded ESG programs across the 11 providers. The ESG Exit Interviews lasted an average of 28 minutes and 44.5 seconds per program.





Annual Report: Year 2 Results CoC & ESG



Annual Report: Year 2 Results CoC & ESG Cont...

- There are still some providers whose programs are administered and managed using separate databases beyond HMIS. The utilization of HMIS is unpredictable and far from standardized. The majority of data transfer is manually conducted.
- General monitoring compliance issues, inconsistent expectations of monitoring processes, and potential implications of program-based non-compliance at the system level were observed and documented during initial year monitoring.
- In both CoC-wide and ESG program reviews, there are observed irregularities with program enrollment to include multiple enrollment events (same program), potential double dipping (multiple funding sources when distinct service is required), and/or multiple concurrent program enrollment.
- Monitoring tools will need to be fine-tuned prior to Year 3 implementation, but no substantial changes required based on Year 2 outcomes.



Annual Report: Lessons Learned

- Continuing to develop a scalable and sustainable External Monitoring Process, the Lessons Learned section of the Year 2 Annual Report includes qualitative results from exit interview questions and responses related to the monitoring process.
 - In Year 1, there was a Provider Survey; however, considering the COVID-19 crisis and responses to immediate needs, there wasn't sufficient time to conduct the annual survey and compile results prior to this presentation.
 - Similar to Year 1, lessons learned will be presented from the perspective of the Monitoring Working Group, the Collaborative Applicant, and the Strategic Progress EMT.
- The Qualitative Analysis of Exit Interview feedback offered insight into processes and approaches from the provider perspective, which were incorporated into recommendations for Year 3. As ESG Exit Interviews are currently ongoing, qualitative analysis will not be presented today, but will be included in the annual report and SNHCoC Board Presentation.
 - Comprehensively, the 23 Exit Interviews were found to be 82.6% (19/23) positive with 17.4% (4/23) neutral (or neither positive nor negative). When assessed from a CoC and ESG monitoring period perspective, the
 - CoC Exit Interviews were 66.7% (8/12) positive and 33.3% (4/12) neutral (or neither positive nor negative)
 - ESG Exit Interviews were 100% positive (11/11).
 - 75% of CoC provider feedback was positive in tone with 8/12 (67%) giving more substantive feedback about the EMT, monitoring process, and/or monitoring tools
 - 100% of ESG provider feedback was positive in tone with with 8/11 (73%) giving more substantive feedback about the EMT, monitoring process, and/or monitoring tools



Annual Report: Lessons Learned Cont...

- Based on Year 1 Lessons Learned, ESG and CoC-wide monitoring was conducted using the same tools and standardized reporting procedures with customization to certain reports based on programmatic structure and contract requirements (specifically for ESG). From a tool perspective, there is still a need for improved and expanded reporting applications for monitoring:
 - The V3 of the Performance Monitoring Report identified data irregularities related to program funding
 - Coordinated Entry/Intake Assessment tool would improve monitoring effectiveness
 - Housing First the deployed HUD tool needs revisions as scoring elements were inconsistent by program type
 - HMIS Data Compliance tool would improve monitoring effectiveness



Annual Report: Lessons Learned for the MWG

- For the MWG, Lessons Learned included:
 - A mock-monitoring training for MWG members who are not representatives of provider agencies would benefit overall understanding of monitoring process, expectations, and assist with aligning local policies and procedures to increase monitoring efficacy.
 - SNHCoC specific policies and procedures for ESG and CoC-wide programs
 - More consistency between Jurisdictions for ESG program requirements and communications
 - ESG contracts include objectives or outcomes that are either not tracked in HMIS or are not consistently reported by providers
 - ESG jurisdictional differences create provider documentation issues and results in less robust and clearly articulated program documentation
 - Funding award modifications and contract adaptations have not been consistently communicated in writing, which results in more extensive and time-consuming file review for both the provider and monitoring team.
 - Client Case files continue to be a main area of inconsistencies from a provider-to-provider perspective as well as a scoring outcome. Expectations for HMIS utilization and client case file documentation would benefit from local policies and procedures.
 - Additional revisions to the Spending/Drawdown rate and process for monitoring therein is a substantial need as the HUD recommended calculation of spending/drawdown does not adequately or accurately reflect budgeting, expenditure tracking, reimbursement requests, or overall grant compliance with awarded funding.
 - Improved communication from MWG members to non-MWG member providers remains an area for improvement.



Annual Report: Lessons Learned for the CA

- For the Collaborative Applicant, Lessons Learned included:
 - The Collaborative Applicant serves only as the designated party eligible to collect and submit the Consolidated application, priority listing and other information to HUD.
 - Providing tools to providers in development of proposals and program implementation improves initial year monitoring scores.
 - External Monitoring has improved the effectiveness of program provision and monitoring scores have increased from Year 1 to Year 2 even with more extensive tools.
 - Continued commitment to consistent monitoring with local policies and procedures designed to align with standards outlined in monitoring will create a more standardized system and offer further opportunity to measure and compare program outcomes.
 - From Year 1 to Year 2, the EMT has observed substantial "buy in" from providers as seen in new program monitoring scores as well as increased scores in existing program monitoring scores.
 - There were improvements in collaboration between working groups as it relates to monitoring, but specific tools from specialized working groups are still needed to improve the monitoring process, increase quantitative monitoring measures and objective scoring components. Examples:
 - HMIS Data Quality and Compliance Tool
 - Coordinated Entry/Intake Tool
 - Continued emphasis on the importance of monitoring with ongoing collaboration between the Strategic Progress EMT and HomeBase will further improve competitiveness of SNHCoC providers in national competitions for funding awards.



Annual Report: Lessons Learned for the Strategic Progress EMT

- For the Strategic Progress EMT, Lessons Learned included:
 - Proposed timelines continue to be an area for improvement. COVID-19 created disruption in the monitoring year and resulted in longer than anticipated completion of monitoring activities specifically with ESG monitoring. Seeking opportunities to conduct monitoring simultaneously will limit time requirements for monitoring and allow for more consistent utilization of monitoring tools in a standardized process.
 - Desk Audit monitoring preceding site visits is not the most effective means to conduct monitoring and future monitoring should commence with the Site Visit.
 - While training and exit interviews improved monitoring processes with providers, there is a need to provide system-wide Monitoring Training, so processes, approaches, and expectations of monitoring are more widely understood.
 - Continued efforts to simplify monitoring tools with modified scoring especially with the Client Case File Tool will improve tool efficacy and more accurately reflect programmatic outcomes.
 - Virtual Site Visits are effective for replacing in person monitoring and formal development of a Virtual Monitoring Standard Operating Procedure could create an emerging best practice considering current pandemic circumstances.



Annual Report: Recommendations Timeline for Year 3

- November-December 2020: Tool development, modification, and integration.
- January 2021: HomeBase collaboration on tool changes and PRESTO upload process adaptations
- January 2021: MWG, Jurisdictional Lead, and Provider Monitoring Process & Tool Training Year 3 Commencement
- February-March 2021: CoC & ESG monitoring to commence with Virtual Site Visits and supported by Desk Audits.
- April-May 2021: Secondary monitoring if needed for CoC & ESG programs.
 Finalization of results from initial monitoring and preparation for final reporting.
- June 2021: Conduct Exit Interviews on an Agency-basis, Publish External Monitoring Reports, and submit all monitoring results to the Collaborative Applicant & MWG



Annual Report: Recommendations Timeline for Year 3 Cont...

- June 2021: Work with HomeBase to integrate CoC-wide monitoring results with PRESTO utilizing adapted templates. This will integrate monitoring processes with scoring and ranking procedures.
- July-August 2021: Update Annual Report and Annual Presentation for presentation to MWG in August 2021 and SNHCoC Board in September 2021.
- September 2021: (Beginning of Year 4) Publish Annual Report & Present Annual Update to the SNHCoC Board.
- October 2021: Begin Year 4 Monitoring Process with goal of completing all Year 4
 activities and deliverables by 30 June 2022 with the exception of the Annual Update
 presentation to the SNHCoC Board, which would be planned for July 2022.



Summary of Recommendations

- Year 1 Recommendations Planned Implementation in Year 4 (4-recommendations):
 - Year 1 Recommendation 2: Task the Coordinated Entry Working Group to determine parameters upon which to measure Coordinated Entry compliance and provision of reports to be included in monitoring tool scoring.
 - Year 1 Recommendation 3: Task the HMIS Working Group to determine parameters upon which to measure provider usage of HMIS. These determinations should include elements such as:
 - Consistent HMIS usage expectations as it pertains to client information on profile and program enrollment screens, especially those agencies that use other databases for client management and case notes
 - Development of clear guidance to be given to providers (perhaps at PADL meeting)
 - Mechanism to ensure that providers can acknowledge understanding of expectations (perhaps signed form)
 - Developed parameters for monitoring should also include identification and provision of reports for inclusion in monitoring tool scoring.
 - Year 1 Recommendation 6: Task Monitoring Working Group in collaboration with External Monitoring Team to create weighting parameters for all new and existing scoring elements as recommended from Year 1 results.
 - HMIS Data Quality and Compliance Tool
 - Coordinate Entry/Intake Tool
 - Year 1 Recommendation 9: System-wide recommendation to finalize and provide clear consistent written standards for ESG and CoC programs.



Summary of Recommendations Cont...

- Year 2 Recommendations for immediate implementation in Year 3 (6-recommendations):
 - Task the EMT in collaboration with the MWG and the Collaborative Applicant to revise the scoring structure of the tools from the current scoring to a five-point Likert-type scale
 - Task the EMT in collaboration with the MWG and the Collaborative Applicant to revise the Client Case File tool to create a scoring metric that accounts for each client case file reviewed equitably.
 - Task the EMT in collaboration with the MWG and the Collaborative Applicant to revise the Housing First Standards Assessment tool to align with the SNHCoC tools with scoring scale and programmatic specificity.
 - Task the EMT in collaboration with the MWG and the Collaborative Applicant to incorporate a Fair Market Rent (FMR) calculation as part of the Main Monitoring Tool.
 - Task the EMT to review and revise all tools for the review and approval by the MWG and Collaborative Applicant, as follows:
 - To remove duplicative components and content
 - Revisions related to Chronic Homelessness as programmatically applicable
 - Adjust questions based on CFRs where appropriate
 - Amend questions related to Termination and Conflict of Interest as appropriate
 - To add content concerning Housing First and person-centered case management where applicable
 - Task the EMT in collaboration with the MWG and Collaborative Applicant to incorporate Housing Quality Standards into scoring components.



Summary of Recommendations Cont...

- Year 2 Recommendations for implementation in Year 4 or beyond (4-recommendations):
 - Planned for implementation in Year 4, the HMIS Data Quality and Compliance Tool and/or Coordinated Entry/Intake Tool will need to be incorporated into the external monitoring scoring. Prior to Year 4, task the MWG in collaboration with the Collaborative Applicant and the EMT to revise the Project Scoring Tool weighting parameters.
 - As part of the HMIS Data Quality and Compliance Tool recommendation, task the Evaluation and Monitoring Working Groups to develop and adopt standard rules and expectations concerning data quality and the utilization of HMIS therein.
 - Task the SNHCoC providers as part of the monitoring process to provide a summary of project specific goals and accomplishments for the monitoring year for consideration in monitoring activities, scoring, and reporting.
 - Task the EMT in collaboration with the MWG and Collaborative Applicant to develop a Client Interview Tool as part of the Client Case File Tool.



Q&A

