# Behavioral Health Bridge Housing (BHBH) Program

# **Quarterly Reporting**



February 2024

## **DHCS Welcome**

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**Section Chief** 

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**Department of Health Care Services** 







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### Agenda

Welcome and Introductions

Quarterly Report Overview – page by page

Accessing and Completing the Quarterly Report

Next Steps







#### **Data: Quarterly Reporting**

Important Deadlines: March 29, 2024: Quarters 1 and 2 May 15, 2024: Quarter 3

Completing and submitting your county behavioral health agency's quarterly reports is required.





# **Quarterly Reporting**

The quarterly reports are structured as follows:

- 1. Organization information
- 2. Program Data Report: Participants served
- 3. Program Data Report: Service and housing delivery
- 4. Expense Summary
- 5. Narrative Questions
- 6. Grantees must submit quarterly reports in the grantee portal.



# **Program Data Report: Participants Served**



## **Participants Served**



#### **BHBH Participant Defined**

Participant must be established as eligible for the BHBH Program and have stayed at least one night in bridge housing within the last 90 days.





# **Participants Served: Unduplicated**

Unduplicated number of participants: The total number of program participants during a quarter. Each participant is counted \*only once,\* no matter how many activities or direct services that individual received during the quarter.



Helpful tips for keeping unduplicated counts			
Use identifying numbers	Use Excel	Remove duplicates	Use formulas and pivot tables





# **Participants Served: This Quarter and To Date**



Every quarterly report will ask for a count for that particular quarter, as well as to date

 Be sure to track those numbers separately

• Cross-check to ensure the "to date" count is **unduplicated** 





# **Participants Served: Families**



"Family" includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family. (Source: HUD Continuum of Care Program FAQ; see **RFA**, Attachment B.)





### **Program Data Report: Participants Served**

#### **FROM HMIS**

#### COUNTS

- Individual participants
- ALL individuals (including family)

SEX RACE AGE VETERAN STATUS

#### **NOT FROM HMIS**

#### SUD/SMI

- Track SUD, SMI, co-occurring or unconfirmed diagnoses

#### CARE

- Referrals received into BHBH
- Are the referrals new participants?





# Program Data Report: Service and Housing Delivery





### **Service and Housing Delivery: Bed-Nights**

• "Bed-nights" are defined as the total number of beds that were **filled** by participants during the quarter.







#### **Service and Housing Delivery: Encounters**

 Service Encounter: occurs every time a participant interacts with the program for example, an engagement discussion, case management, housing navigation or check-in.







# **Service and Housing Delivery: Program Exit**

• **BHBH Program Exit**: If someone has not been engaged in BHBH, which requires at least one night of BHBH shelter/housing services in the last 90 days, they are exited from the BHBH program.







# Program Data Report: Service and Housing Delivery

Outreach and Engagement Data	Number This Quarter	Number—Program to Date
How many unduplicated individuals did you provide outreach services to through the BHBH program?		
How many outreach service encounters did you provide?		





# Program Data Report: Service and Housing Delivery

Housing Type	Total Number of Unduplicated Individuals Served This Quarter	Unduplicated Number of CARE Program Participants Served This Quarter	Total Number of Bed Nights Provided This Quarter
Shelter			
Interim Housing			
Rental Assistance			
Auxiliary Funding in Assisted Living			
Total*			





# **Housing Stability in Selected BHBH settings**

Housing Type	Housed After 6 Months to	Number Still Housed After 12 Months to Entering BHBH	Housed After 18	Number Not Still Housed or Unknown Status
Rental Assistance				
Auxiliary Funding in Assisted Living				





# **BHBH Program Exits**

Program Exit Data	Number of Unduplicated Participants This Quarter	Number of Unduplicated Participants—Program to Date
How many participants have exited the BHBH program?		
How many participants exited BHBH into homelessness?		
How many participants exited BHBH to institutions?		
How many participants exited BHBH to temporary housing?		
How many participants exited BHBH to permanent housing?		
How many participants exited BHBH to other destinations (including those the program was unable to locate)?		





# **Vacancy Rates**

Vacancy Rates	Number This Quarter	Number—Program to Date
What is the total number of BHBH bed nights paid for by BHBH and available?		
What is the total number of BHBH bed nights that were occupied?		
What is the total number of BHBH bed nights that were unoccupied (vacant)?		





# **Housing Navigation**

Housing Navigation Data	Number This Quarter	Number—Program to Date
What is the total number of unduplicated participants for whom you provided housing navigation services through the BHBH program?		
How many housing navigation service encounters did you provide through the BHBH program?		





# **Expense Summary**





## **Expense Summary**



Expense Summary Data	This Quarter	Program to Date
Total Funds Expended		
Total Funds Expended in BHBH Operations		
Emergency Shelter/Interim Housing		
Rental Assistance		
Auxiliary Funding in Assisted Living		
Housing Navigation		
Total Funds Expended in Start-Up Infrastructure		
Total Funds Expended in Other Flexible Funding Categories		





\*Have there been any changes to your BHBH Program Plan or budget? Proposed Program Plan or budget updates must be uploaded to the portal for approval.\*

# **Narrative Questions**





SALE REPORT

### **Narrative Questions**

 $\circ$  Overall accomplishments

- Overall challenges/barriers
- CARE Program plan implementation/trainings
- Landlord/outreach engagement efforts
- Housing navigation efforts





#### Accessing and Completing Your Quarterly Report





## **Discussion, if time allows**



- Knowing you will be required to provide this information in your quarterly reports . . .
  - How will you track this data to make ongoing quarterly reporting easier?
  - What systems can you implement to help make pulling data each month as smooth as possible?
  - How do you train staff to track these data points?





### **Questions?**





## Reminder

To submit questions or request a consultation related to your BHBH County BHA Quarterly Report, please contact your AHP County Liaison.





#### **Quarterly Reporting Office Hours**

#### Wednesdays, February 28 - March 27 2:00 – 3:00 p.m.

<u>Registration</u> is required.

