Tamera Kohler
President & CEO
Regional Task Force on Homelessness
4699 Murphy Canyon Rd, Suite 106
San Diego, CA 92123
[Delivered Electronically]

23 February 2024

Dear Ms. Kohler:

I write to request all anonymized data generated in the Homeless Management Information System (HMIS) through County-funded contracts as listed in the attached data request.

The list of County-funded contracts below was provided by the County of San Diego in response to a request made by the San Diego County Taxpayers Association (SDCTA) regarding contracted services with data entered into HMIS. Questions related to County authorization for release of this data to SDCTA can be directed to County staff, Maggie Ramsberger, maggie.ramsberger@sdcounty.ca.gov, or Jack Pellegrino, jack.pellegrino@sdcounty.ca.gov.

If you or your staff have any questions on this request, you may contact Mr. Ryan Penkala, rpenkala@sdcta.org, 619.234.6423.

Yours respectfully,

Haney Hong
President & CEO

County Contract #	Contractor
567114	Alpha Project for the Homeless
566652	Alpha Project for the Homeless
569467	Dreams for Change
563429	Episcopal Community Services (ECS)
560945	Equus Workforce Solutions (EWS)
562409	Equus Workforce Solutions (EWS)
567272	Equus Workforce Solutions

	(EWS)
567563	Interfaith Community Services (ICS)
567352	Interfaith Community Services (ICS)
565101	People Assisting the Homeless (PATH)
568318	People Assisting the Homeless (PATH)
561601	Rooted Life

HMIS REPORT/DATA REQUEST FORM

This form must be completed and submitted to the HMIS team through support@rtfhsd.org to request data from the RTFH. Requests for research projects must be approved by the HMIS Lead Agency. Should the HMIS Lead Agency determine that additional review is required, the request will be forwarded to the Evaluations Committee for a final determination. Review the Privacy Use and Disclosures section of the HMIS Policies and Procedures for more information.

Requester's Name: Haney Hong	
Requester's Organization (if applicable): San Diego County Taxpayers Association and San Diego Taxpayers Educational Foundation	
E-mail address: hdhong@sdcta.org	Date of request: 02/23/2024
Phone Number: (619) 234-6423	Desired completion date: 03/09/2024

Description of the report/data request:

We are requesting enrollment and demographic data on all clients serviced through the contracts in the attached table, all of which are county-funded. We are requesting data on all client-level variables recorded in HMIS, excluding those which contain personally identifiable information and personal health information. Our formal request includes detailed descriptions of the data we hope to collect.

This is the same format as the data you provided us before, except your original export, which you asked us to destroy, was for 2015-2022 for all programs, whether County funded or not.

Purpose of the report/data request: We are interested in understanding the efficacy and efficiency of various county-funded homelessness services programs. Specifics of the study for which we plan to use the data are included in our methodology summary, which we have sent to RTFH and which is included again as an attachment for your convenience.

Requested report period: From: 2015 through now

How often will data be needed? (Once, monthly, quarterly, yearly…) Once, though we expect we will ask for periodic updates to make our data current.

When is the data needed by? ASAP.

What data elements should be included in the report? (Examples: Gender, Ethnicity, Race, Age, Employment Status, Income). Please refer the HMIS Data Dictionary for a complete list of data elements collected in HMIS.

Client Unique Identifier, Date of enrollment, Date of exit, Program Title, Operator Name, Exit Destination, Client Race, Client Enrollment Age, Client Exit Age, Client Ethnicity, Veteran status, Gender, Disability, Household

Will the data be published? If yes, please describe. While individual data points will not be published, a report on our analysis will be published. You have already received our intended methodology, and we did not receive feedback or other recommendations from you when we asked.

Please specify if you have any additional information about this data request?

Clients requesting their HMIS record should request their record from an agency that they have been served by.

There is an estimated cost of $500/hour for report requests. E-mail this form to support@rtfhsd.org with Subject: Report/Data Request.

Name: <u>Haney Hong</u> Signature   Date <u>02/24/2024</u>

Tamera Kohler
President & CEO
Regional Task Force on Homelessness
4699 Murphy Canyon Rd, Suite 106
San Diego, CA 92123
[Delivered Electronically]

23 February 2023

Dear Ms. Kohler:

I write to request data on behalf of the San Diego Taxpayers Educational Foundation. As you know, we seek these data so that we can conduct independent analyses on the region's system of care, and we do this as a service for the San Diego taxpaying public and policy makers.

Specifically, we are requesting a data set that shows the information outlined in the enclosure and any other relevant non-personally identifiable client information so we can learn how clients move throughout the continuum of care (COC) and if/ when individuals return to homelessness after receiving services and exiting to permanent housing.

Anticipating concerns about privacy, we wish to underscore that we do NOT seek any names, phone numbers, or other personally identifiable information. We request the data to be anonymized with the clients' unique identifiers.

Additionally, we are more than willing to compensate RTFH for the staff time it takes to share these data. We believe your rate is $150 an hour, though if that has changed, please let me know.

We request this information so that we can conduct an econometric analysis to determine the costs of effective service delivery in homelessness services and to identify opportunities for efficiencies. We intend to combine the data we are requesting from you with the Federal, state, and municipal expenditure data we are collecting.

We also wish to parse out independent factors that may affect the costs of effective service delivery. For instance, it seems highly likely that it would be more costly to conduct effective service delivery for an individual diagnosed with mental illness than it would be for an individual who is not struggling with mental illness or another disability. Because it is regionally accepted that there are many factors that can affect client outcomes, we request as much anonymized client-specific data as possible, even if it is not listed in the enclosure, so that we can parse out the various independent factors.

Before we perform any statistical testing, we certainly welcome your input on what defines "effective," i.e., the dependent variable.

(continued on next page…)

If you or your staff have any questions on this request, my point of contact is the study's lead analyst Ms. Anna Pelz, apelz@sdcta.org, 619.391.0385.

Yours respectfully,

Haney Hong
President & Trustee

Encl:
Data Request

CC:
RTFH Chair Ray Ellis

Enclosure: Data Request

We are requesting a data set in which each row represents a single client enrollment and contains the following client-level variables.

We request the designation, i.e., name, of the program each client entered, the organization or agency operating that program (if possible), and the client's exit date and destination, including whether it was to permanent housing, if the client has exited from that enrollment.

If it is not feasible to present the data in the exact format outlined below, we are comfortable with reasonable adjustments to data structure provided that the information contained in the data remains the same. For example, if it is easier to present a client's gender using character strings (male/female) as opposed to numeric indicators, we welcome that and similar adjustments.

We request as much anonymized client-specific data as possible, even if it is not listed below, so that we can parse out the various independent factors that may affect costs of effective service delivery.

If it is easier for your team to time bound your data query, we specifically request these client enrollment data from 2015 to today.

Column	Field name	Length	Type	Comments
A	Client Unique Identifier		string	Alphanumeric identifier which is unique for each client
B	Date of enrollment	7	date or string	Date of client's enrollment, written as mm/dd/yyyy
C	Date of exit	7	date or string	Date of client's enrollment, written as mm/dd/yyyy
D	Program Title	No max	string	Name of the program in which the client was enrolled
E	Operator Name	No max	string	Name of the organization operating the program in which the client was enrolled
F	Exit Destination	No max	string	Type of exit from the program in

				which the client was enrolled
G	Client Race	5 max	string	Client's racial group. Values could be: white, black, asian, other,
H	Client Ethnicity	1	int	Binary variable which equals 1 if the client is ethnically Hispanic or Latino, 0 if not
I	Veteran status	1	int	Binary variable which equals 1 if the client is a veteran and 0 if not
J	Gender	1	int	Binary variable which equals 1 if the client is male, 0 if the client is female (or vice versa)
K	Disability	1	int	Binary variable which equals 1 if the client has a disability, 0 if not
L	Household	1	int	Binary variable which equals 1 if the client is traveling as part of a family, 0 if not