

II. A. INTRODUCTION TO ASSESSMENT MATERIALS

This section contains examples of quantitative research tools and reports that communities can use to assess the nature of discharge issues locally. This is an important first step in addressing community issues of inappropriate discharge and creating policies of homelessness prevention.

The examples included here range from program specific data collection to system-wide analysis. These tools can generate data that will support communities in assessing and addressing discharge issues through analysis and advocacy, whether or not the community has a client data collection system in place. If there is increasing shelter demand in a community, is it being driven by discharges from public systems? How can local providers learn who is coming to shelter directly from state systems of care? How can a data picture be assembled and used to affect policy?

All of the data presented here can be read for what they reveal about the issue of discharge to homelessness. Some of the data are also straightforward enough in construction – relying on simple information collection tools and Powerpoint presentations - that they can serve as models for localities to institute a series of steps toward their own data collection and analysis initiatives.

First, tools from the Massachusetts Housing and Shelter Alliance (MHSA) [Homeless Shelter Census and Overflow Data Initiative](#) [LINK to document II. B.] are presented to provide a basis for using state and local homeless census data to identify discharge issues. MHSA has collected nightly census data for adult shelters in Massachusetts since 1992. Data related to the steady rise of overflow demand in Massachusetts shelters are shown, as is MHSA's data response: initiation in 1997 of a shelter based census of new guests entering from specific subpopulations. This subpopulation census provided the basis for much of MHSA's work in understanding the routes into homelessness from state systems of care. Included are nightly census and overflow data, as well as the subpopulation outcomes and a sample data collection tool that can be adapted to local issues and circumstances.

MHSA convened several statewide and regional conferences to present its data and that of other key researchers. The research of Dr. Dennis Culhane of the University of Pennsylvania was key in corroborating both the institutional histories of newly homeless people and the costs associated with public care and shelter use. This research also gives a macro level view of what can be learned about service use and costs in communities. Dr. Culhane's presentation on the [Impact of Homelessness and Supported Housing on Health Services and Shelter Utilization](#) is included. [LINK to document II. C.]

Both MHSA's research and that of Dr. Culhane made clear that burgeoning numbers of homeless people were not, in fact, anonymous street people resisting engagement with care or services. In fact, quite the opposite was true. [Health Care: Data from the Lives of Homeless People: Morbidity Review of 13 Homeless People who died in Boston, July](#)

1998 - January 1999 [LINK to document II. D.] is a detailed research presentation by Dr. James O'Connell of the Boston Health Care for the Homeless Program. Dr. O'Connell examined the treatment histories of 13 homeless people who died and found that they were well known to public systems of care. Many of those who died had been in care within hours of their deaths.