

Dennis Cullinane

Why hasn't Uken gone
private? (~\$2,000 for cities)

- recognize benefit of overall
federal coordination + t.a.

Andrew: sign-off on \$ + concept

- staffing is real issue
- HUD not funding won't
kill it

Mark Johnston 708-1226

Jim Hoban, PDR

- what abt amending PDR contract ~~by~~ Uken?
→ interagency agt

Mila Rowenhouse - works for Mnt ANCHoR: Highlights

o What is ANCHoR?

- Makes available information to providers and city and state government on homeless service system.
- ANCHoR provides a software program: standardized need assessment, creates individualized service plans, and records the use of housing and services.

o Which communities are participating?

- 16 test sites, ranging in size from New York City to Savannah Georgia - all want to continue
- at least 40 additional cities have indicated an interest

o What is the time frame for ANCHoR?

- Scoping conference with input from various groups: 3/95
- Beta Testing: 4/96 - 8/96
- Final Product: 11/96 1/97

o What are the benefits to localities?

- Most communities have no way to measure the need for or use of homeless services. Most rely on 1-night surveys, etc.
- Some large cities have developed tracking systems, but often use main-frame computers and may be cumbersome to use.

ANCHoR → on-line

Phases

1) design + develop

2) develop new modules + analyze how communities can use

U Penn
October Proposal:

- 1) disseminate guidance
- 2) Help-Desk - for glitches - 24-hour; phone
- 3) Reg'l or Nat'l conferences for current + potential users

M. Ellen → U Penn flexible - could be persuaded to do conferences

Question of link w/ Con Plan

If they doesn't participate → fed'l release

HHS: \$50K from ASPE

- will also talk w/ operating div's

more of a tool for general shelter, not for specialty
- looking @ special modules in Round II
e.g. - MH → these fac's have computer + conf'lity issues greater

*Michigan coal, Louisville coal
U Penn

ANCHOR

State-of-the-art software to track utilization of homeless services

Software developed by UPenn; funded by HUD, HHS and Fannie Mae

Technical assistance needed to help communities implement effectively and with proper confidentiality safeguards. T.A. needed for technical questions as well as planning

- helping communities think how to use; confidentiality agreements, between client and provider and between ANCHOR server and provider, on procedures and protocols for data management, on what data will be universal collected by all providers; local, state and federal laws about confidentiality

- affordability

Results: "instant reward"; speedier intakes at emergency shelters; growth of communication between providers; greater ease and movement of clients through the system

Lots of \$ spent on devlpt, testing -
if not loose, wasted - doesn't need it to be private
- needs networking - confidentiality - sensitive data
Many groups would like to use - so needs to be off 1/1

Meeting
to resolve
dispute

Jacquie
708-0270
X 4348

ANCHOR

① Devlpt

• Has to leave PD & R (no longer research) & goes to
CPD
Consent that'll become system of aggregated data, if not
process around
e.g. Cochrane doesn't
support

Public domain software devlpt - will be out this fall

HVD, HHS, Fannie Mae, & U Penn

PRNT
PBRT has tech'l
expertise
urban interest
Ch. overhead
64%

② T.A. / Help desk (250k) → ASPE

Options:

- U Penn

- Macro (bad idea)
Systems

technical T.A.
Planning T.A.
could be series
of workshops

CPD has agreed to fund some t.a.
HHS will also contribute (~\$50k)

Planning
once community has software, helping them think how to use it...

9/3 Jacquie: agreed to look for \$

- concern about proprietary vts if just ANCHOR (Merge Turner)

□ trying to use current contract

? is about how
connects w/
consolidated
plan

HVD & HHS invested \$500k in ^{next funding}
pleased w/ early res
actively exploring ways to make that tech and
similar tech available thru out country

? about whether
was to be existing
contract - appears
or can be Penn

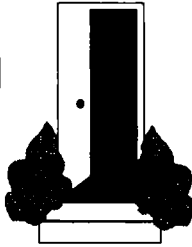
Abelair sent ltr to Cuomo

□ Oves of link w/ consolidated plan, internal funds

→ Early next year, funding comments will be incorpd - read

AGAINST

1210 West Saginaw
Lansing, Michigan 48915



MICHIGAN COALITION

HOMELESSNESS

AUG 20 1996

(517) 377-0509

August 16, 1996

Ms. Carol Roscoe
Domestic Policy Council
The White House
Washington, D.C. 20500

Dear Ms. Roscoe:

On behalf of Michigan homeless assistance providers I am writing to seek your support for replicating the success of the ANCHoR Intake and Tracking Software. The ANCHoR System for Homeless services has been developed at the University of Pennsylvania under the leadership of Dr. Dennis Culhane. The software development has been funded by the U.S. Department of Housing and Urban Development (HUD), Office of Policy Development & Research; the U.S. Department of Health and Human Services (HHS) and the Fannie Mae Foundation.

The Coalition applauds the Federal government for realizing that communities all around the United States were spending large amounts of money to develop computer software to track utilization of homeless services, and taking a leadership role in funding a project to develop state-of-the-art software that will be in the public domain and that will be available to communities and nonprofit organizations without prohibitive cost. The concern of Michigan communities and nonprofit homeless assistance providers is that the Federal government will pay for the development of the software but then will not go the next step to fund a help desk for the software or fund the technical assistance necessary for communities to effectively implement use of the software.

The software is currently being piloted in numerous communities across the country. Michigan has two communities that are pilot sites for the ANCHoR Intake and Tracking Software, Detroit and Grand Rapids. Other communities, including Lansing and Battle Creek, are ready to replicate use of the software as soon as it is available. The software will enable communities to be able to track utilization of homeless shelters including recidivism, average lengths of stay, addresses of origin, the flow of homeless people through the shelter system, and other indicators that will help communities know who is being served in shelter and what programs and services need to be developed to help people move out of homelessness.

Through the policy emphasis of encouraging communities to collaborate and cooperation on creating a continuum of care system of homeless services, the Federal government has created a new spirit of cooperation and joint planning among government and nonprofit homeless assistance organizations in many communities around the country. Interest in tracking use of the shelter and service is a natural outcome of this increase in cooperation and collaborative planning.

It is of vital importance that HUD and HHS, which have funded the development of this software, follow through to provide the funds necessary for the software to have the support communities will need to implement and replicate use of it. It has been rumored among providers that the University of Pennsylvania will have to charge a large fee to communities who are interested in replicating use of the software because of lack of continuing funding for the project. This is an issue where the Federal government has shown leadership in developing a state-of-the-art software system and now should provide the resources necessary to support the software without prohibitive costs to communities.

Communities need to learn from each other the most effective ways of implementing the software system and need a place to call with answers for technical questions. The success of this national demonstration could rest on the provision of a \$250,000 technical assistance contract so that communities have a 1-800-number to call with questions. On behalf of Michigan communities trying to eliminate homelessness, I ask your support in encouraging HUD and/or HHS to continue supporting the ANCHoR demonstration and to provide the necessary technical assistance funds.

I have enclosed the Coalition's 1995 annual report to explain the mission of the Coalition. The Coalition currently represents 70 organizational members including the Cities of Detroit, Lansing, and Battle Creek. The Michigan Coalition Against Homelessness is a nonprofit membership organization formed in 1990 as an association of emergency shelters, transitional housing programs, government agencies, housing programs, and concerned citizens from across the State. The Coalition's goals are to increase communication among Michigan homeless services providers and improve the quality of services provided to homeless people through education, collaboration, technical assistance, and advocacy.

Thank you for your attention to this matter. The ANCHoR Intake and Tracking Software is very popular with providers and communities because it is addressing a pressing need. You need to be aware of its need for continuing support.

Sincerely yours,



Helen Guzzo
Executive Director

cc: Secretary Henry Cisneros
Assistant Secretary Michael Stegman, HUD
Gregory Murray, City of Detroit
James Winslow, Kent County Community Development
Carol Goll, City of Detroit
Melanie Winnicker, City of Lansing

Michigan Coalition Against Homelessness

1995 Annual Report

Organizational Membership is \$100 and Individual Membership is \$30 per calendar year.
Thank you to all members for their support.

ANIZATIONAL MEMBERS

Advisory Center for Teens, Homeless
Youth Services, Grand Rapids
Advent House Ministries, Lansing
Alternatives for Girls, Detroit
Bethany Christian, Fremont
Bluelake Residential Care, Port Huron
Building Block, Grand Rapids
Catholic Human Development,
Grand Rapids
Coalition on Temporary Shelter,
Detroit
Coleman & Cooper Consultants,
Ypsilanti
DARES-PATHWAY Shelter Home,
Port Huron
Detroit Rescue Mission Ministries
Disabled American Veterans, Grand
Rapids
I ling Place, Grand Rapids
Eastside Transitional Center, Detroit
Emergency Shelter Services,
Benton Harbor
Freedom House, Detroit
FIVE-CAP, Scottville
Friendship Shelter, Gaylord
Gateway Community Services,
Lansing
Goodwill Industries, Traverse City

Grand Rapids Dominicans
Haven Community Mission, Detroit
City of Lansing, Human Relations &
Community Services Department
Loaves and Fishes, Lansing
Kent County Community
Development Department
Macomb Coalition for Emergency
Shelter
Macomb County Intermediate
School District
Macomb County Community
Mental Health
Marquette Alger Intermediate
School District
Ministry with Community, Kalamazoo
Mount Clemens School
Muskegon Public Schools
Northeast Michigan Community
Services Agency, Alpena
Oakland County United Way
Operation Helping Hand, Detroit
Saginaw County Youth Protection
Council
The Sanctuary, Royal Oak
Shelter of Flint
South Oakland Shelter, Royal Oak
St. Clair County Community Mental
Health, Port Huron

S.O.S. Crisis Center, Ypsilanti
Traverse City Housing Commission
United Community Housing Coalition,
Detroit
YMCA of Metro Detroit
YWCA of Metro Detroit

INDIVIDUAL MEMBERS AND CONTRIBUTORS

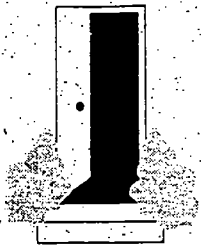
Jeanne Andersen, Washington, D.C.
Charles Anderson, Cities in Schools,
Detroit
Elizabeth Byron, Neighborhood
Services Department, City of Grand
Rapids
Joyce Dallas, Operation Get Down,
Detroit
Norma Dell, Lenawee Emergency &
Affordable Housing Corporation
Denise Dersz, Poverty and Social
Reform Institute, Farmington Hills
Jill Feasley & Kurt Lawson, Takoma
Park, MD
Julie Hales, MI State Housing
Development Authority
Virginia R. Harmon, MI Department
of Mental Health
Jeanne Laurance, Lansing

Patty Lee, Minneapolis, MN
Jennifer Lepard, Wayne Metropolitan
Community Services Agency,
Ecorse
Marsha MacDowell & C. Kurt
Dewhurst, East Lansing
Ronald & Capple Morgan,
Washington, D.C.
Roger Newcomb, MI Non-Profit Real
Estate Development Corporation,
Lansing
Whitney Pavlov, St. Clair County
Intermediate School District
Tim Putney, The Candle Project,
Kalamazoo
Aleta Runey, Detroit
Candy Salazar, Wayne County
Department of Social Services
Sara Hennes, Detroit
Steve Szilvagi, Michigan Department
of Mental Health
William Wroblewski, Family Haven,
Inner-City Christian Federation

Page 4

**Michigan Coalition
Against Homelessness**
1210 West Saginaw
Lansing, Michigan 48915
(517) 377-0509

MCAH - A Growing Statewide Network



Michigan Coalition Against Homelessness

1995 Annual Report

1210 West Saginaw ♦ Lansing, MI 48915 ♦ (517) 377-0509 ♦ FAX (517) 377-0508

1995: The Year In Review

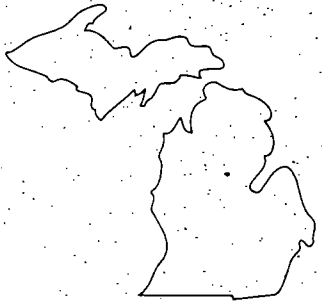
The Michigan Coalition Against Homelessness was founded in 1990 by a group of nonprofit homeless assistance providers from around the State to help train each other and to monitor and disseminate information on state and federal programs. The Coalition hired its first staff in late 1992 with funding from the W.K. Kellogg Foundation.

1995 was a year of transition and accomplishment for the Coalition following a cash flow problem at the end of 1994 where staff had to be laid off. During 1995, the Coalition hired a new Executive Director and was awarded a \$113,228 technical assistance grant from the U.S. Department of Housing and Urban Development (HUD). This funding will help make the Coalition a center for training and help local organizations improve their capacity

to provide quality services. The Coalition is seeking further funding to expand its services to homeless assistance providers.

In July 1995, the Coalition hired a new Executive Director. Helen Guzzo brings a wealth of experience to the Coalition having worked for HUD in Washington, D.C., helping to administer its homeless assistance programs, and having run a shelter for homeless women.

Continued on page 2



The Mission

The Michigan Coalition Against Homelessness is a nonprofit association of emergency shelters, transitional housing programs, government agencies, housing programs, and concerned citizens from across the State.

The Coalition's goals are to increase communication among Michigan homeless services providers, decrease the incidence of homelessness, and improve the quality of services provided to homeless people through education, technical assistance, and advocacy. The Coalition helps homeless assistance organizations improve their skills and knowledge, and share successful methods of serving homeless people, through quarterly newsletters, workshops, monthly membership meetings and annual conferences.

"People are homeless for many reasons, but the one thing every homeless person has in common is lack of suitable housing."

Helen Guzzo

Highlights

Year In Review Continued	Page 2
Statement of Support & Expenses	Page 3
Thanks to Supporters	Page 3
Members	Page 4

Page 1

Michigan Coalition Against Homelessness

1995 Annual Report

1995: The Year in Review (cont'd from page 1)

The Coalition's 1995 accomplishments include:

- * Organizing a productive annual conference
- * Serving as a center of information on program models and homelessness
- * Conducting a technical assistance needs assessment and putting together the technical assistance initiative
- * Educating local coalitions and task forces about Federal homelessness and housing programs
- * Co-sponsoring Homeless Assistance Week 1995 with the Michigan State Housing Development Authority (MSHDA)
- * Representing the concerns of Michigan homeless assistance providers and homeless people to various government and national groups
- * Initiating publication of a quarterly newsletter

With a focus on "Meeting the Needs of Homeless Families," the Coalition's 1995 annual conference, held in Port Huron in March, gathered over 200 providers to share strategies for serving homeless families and educating homeless children. Planning is underway for the 1996 annual conference in Grand Rapids which will focus on providing and developing long-term housing for homeless people.

In July 1995, HUD announced the award of \$39.2 million dollars in Continuum of Care homeless assistance funding to Michigan communities, including \$25.7 million to organizations in the City of Detroit. This represents an unprecedented commitment to fight homelessness in Michigan. The Coalition's promotion of collaboration, cooperation and training played a part in preparing the communities to be successful in the 1995 HUD funding competition. The Coalition will continue this role in 1996.

"HUD increased Michigan's funding because of recent state efforts to create a comprehensive network of homeless services."
Richard Wears, HUD
quoted in the Detroit Free Press

Homeless Assistance Week, held November 12-18, 1995, in partnership with MSHDA, helped homeless providers publicize the work they do every day to shelter homeless people and help them return to productive lives. Providers held open houses, had their work highlighted through stories in local

newspapers, and educated their communities about the work they do to help homeless people. Hundreds of Michigan citizens got a glimpse of the work homeless assistance providers do to help people through a display set up in the State Capitol rotunda. To continue to build awareness of those suffering homelessness and efforts to alleviate the problem, Homeless Assistance Week will be repeated in 1996 during the week before Thanksgiving.

1996 will truly be challenging for homeless assistance organizations given the anticipated cuts in government funding and changes in public policy. During the next year, the Coalition will help member organizations understand and adjust to these changes. The Coalition will continue to grow by adding staff and fulfilling its threefold purpose of: **(1) promoting information-sharing, collaboration and communication; (2) providing technical assistance and training; and (3) monitoring state and federal legislation.**

Organizations that belong to the Michigan Coalition Against Homelessness serve a very vulnerable population. Although homeless people are diverse and have many reasons why they are homeless, all homeless people need a caring hand up; basic necessities like shelter, food and clothes; long term housing; and quality services. **We thank the members of the Coalition for their continued involvement and thank our financial and in-kind supporters for enabling the Coalition to continue to achieve its mission.** With a committed Board of Directors, an expanding membership, a new Executive Director, and a growing base of support, the Coalition can continue to be a leader in improving services to homeless people.

Peggy Posa,
President

Helen Guzzo,
Executive Director



Michigan Coalition Against Homelessness

1995 Annual Report

STATEMENT OF SUPPORT AND EXPENSES FOR 1995 AND 1994

PUBLIC SUPPORT AND REVENUE	1995	1994
HUD Technical Assistance Grant	\$13,972	0
Kellogg Foundation Grant	10,000	\$52,000
Discount Foundation Grant	10,000	0
Business Contributions	2,500	0
Membership Contributions	4,255	7,309
1995 Annual Conference	1,663	0
1996 Annual Conference	3,500	0
Interest	99	780
Miscellaneous	2,334	0
Total Public Support and Revenue	\$48,323	\$60,089
EXPENSES		
Salaries	\$16,953	\$35,581
Payroll Taxes	1,811	2,275
Health Benefits	1,463	3,301
Contractual Services	1,921	13,418
Telephones	1,677	3,029
Printing/Copying	1,294	795
Travel	1,155	1,456
Conferences	553	245
Postage	533	1,291*
Supplies	416	0
Membership in Other Organizations	330	0
Board Meeting Expenses	211	0
Equipment	2,356	0
Miscellaneous	2,357	0
Total Expense	\$33,030	\$61,391
CHANGES IN ACCOUNT BALANCES AND GRANTS RECEIVABLE		
Account Balances, Start of year	\$555	\$1,781
Account Balances, End of year	\$15,849	\$555
Grants Receivable	\$99,256	0

Thank you to St. Lawrence Hospital, Lansing for donating office space to the Coalition.

* For 1994, postage includes supplies, memberships in other organizations, board meeting expenses and miscellaneous.

SPECIAL THANKS TO SUPPORTERS

FINANCIAL SUPPORT

U.S. Department of Housing & Urban Development
The Discount Foundation
The W.K. Kellogg Foundation
Ransom Fidelity Company
NBD Bank
Rental Property Owners Association, Grand Rapids

IN-KIND SUPPORT

St. Lawrence Hospital, Lansing for providing office space.
Michigan State Housing Development Authority for co-sponsoring Homeless Assistance Week
St. Clair County Intermediate School District, Port Huron for co-sponsoring the 1995 annual conference

September 10, 1996

Helen Guzzo
Executive Director
Michigan Coalition
Against Homelessness
1210 West Saginaw
Lansing, Michigan 48915

Dear Ms. Guzzo,

Thank you for your letter regarding funding for technical assistance relating to the ANCHoR Intake and Tracking Software.

As you have noted, the ANCHoR project has demonstrated good potential for helping communities collaborate and coordinate in responses to ending the cycle of homelessness. Recognizing this potential, the Departments of Housing and Urban Development and Health and Human Services are working to fund the technical assistance that can help communities across the country effectively implement the use of this software. I am confident that HUD and HHS will make it possible to replicate the lessons of the ANCHoR project.

I appreciate hearing from you on this important issue. Please feel free to contact me if you have further questions.

Sincerely,

Carol H. Rasco
Assistant to the President for Domestic Policy

Beta Meeting Summary

On July 23 and 24, 1996 representatives from 15 ANCHoR beta test sites gathered with University of Pennsylvania, Center for Mental Health Policy and Services Research ANCHoR project staff and PRWT Services, Inc. software developers in the Conference Theatre of the Hyatt Regency Washington Hotel on Capitol Hill in Washington, DC.

Overall, the meetings were a great success as city after city shared their common and uncommon experiences with the ANCHoR software. Representatives were present from Baltimore, MD, Boston, MA, Camden, NJ, Cleveland, OH, Chicago, IL, Denver, CO, Detroit, MI, Fort Worth, TX, Grand Rapids, MI, Louisville, KY, Miami, FL, New Orleans, LA, New York, NY, Richmond, VA and Savannah, GA.

On the first day, Mr. Kirby Smith, Vice-President, Systems, PRWT Services, Inc. led the day with a review of the ANCHoR project design development process that has taken place since August, 1995, when programming first began. In just 12 months, the ANCHoR System has gone from a collection of sample data entry forms to active working beta test software in 15 cities.

Two cities presented their own personal positive experiences with the software on the first day of the meetings. Mike Berning, from Baltimore, MD and Jinn Fuller of Louisville, KY both presented.

Mike Berning began by explaining the effectiveness of the system they implemented. In Baltimore, there is one main server in the local Bureau of Management Information Systems (BOMIS) offices. All of the providers in Baltimore dial in via modem to this central server, and each uses the same ANCHoR database on this server. It is a very convenient and easy-to-maintain system. However, such a system requires complete data sharing between all providers dialing in to the database server. This circumstance led Mike to have extensive discussions with local community members on the subject of confidentiality. Mike and his team drafted new confidentiality documents and Mike's local legal advocates provided their own expert input.

There are a variety of providers currently participating in the project in Baltimore. A sampling of them includes the Department of Social Services' 24 hour shelter hotline, soup kitchens, job service locations, and emergency shelter providers. All of these sites required some training in order to learn how to use ANCHoR. Mike's team provided Windows® training.

Mike closed by stating that Baltimore was very excited to have the ANCHoR System. The system has already enabled he and his staff to get a more accurate picture of the amount of people being served in the Baltimore community.

Jinn Fuller, from Louisville, KY, in contrast is running the ANCHoR System as stand alone. This means that Jinn's users each have their own database on their own pc in their particular provider site. This also means that files must then be transferred from that site to the central database located in Jinn's office. Jinn can then manage the transfer of data between her data sharing workgroups. However, Jinn would like to address the psychological aspects behind implementing the ANCHoR System.

Jinn views ANCHoR as it is, a tool for the social service provider, a creative tool. Jinn's strategy was, and still is, to encourage her participating providers to start using the software as quickly as possible. Jinn utilized a simplified training regimen. She used the game of Solitaire as a means of training people how to use Windows® and then moved them into ANCHoR. She then decided to train users in operating the Residential Services module. This module is used by emergency shelters. Her providers have found an almost instant reward, no longer do they have long lines waiting outside the shelters, check-in is now quicker, especially if someone already is listed on the system. In time she says that the sites have progressed to having speedier intakes at the emergency shelters. ✓

Jinn says one of the greatest benefits of ANCHoR is how its implementation has required the growth of communication between providers. She says that the community as a whole has progressed, that they are even moving on to discussions of measuring service outcomes. ✓

With the completion of these two presentations, each site elaborated on the extent to which ANCHoR has been installed in their community, and in what type of provider site the program is running.

Baltimore

35 sites: All modules; emergency, transitional, drop-in centers, soup kitchens, legal assistance, job assistance.

Boston

18 sites: Outreach, Assessment and Residential Services; shelters, homes for families, multi-service providers.

Camden

2 sites: All modules.

Chicago

13 sites: All modules; women and families, transitional or second stage programs, One outreach.

Cleveland

2 sites.

Denver

7 sites: Detox center, emergency shelter, transitional housing (mostly for families), drop-in center for women, specialized in AIDS housing.

Detroit

1 site, 7 in training: Child care, 24 hour walk-in, shelters.

Fort Worth

12 sites in training: All modules; night shelters.

Grand Rapids

1 site: 9 in training; permanent housing, emergency, service providers.

Louisville

10 sites (50 programs): Health plan, TB, emergency, transitional, outreach, community ministries.

Miami

7 sites: All modules; emergency and outreach.

New Orleans

8 sites: Outreach, Assessment and Residential; van, day center, 2 shelters.

New York

8 sites: outreach, drop-in, emergency shelter for men (multi-program), pre-natal, family transitional.

Richmond

7 sites: Assessment, Residential, Service Planning; shelters, drop-in center, case management.

The rest of the first day's meeting content was a review of any remaining bugs in the system. The representatives from the test sites vigorously gave their observations to Kirby Smith and the software development team. See attached: 30 Day Fix List.

Day 2 opened with much discussion surrounding potential future modules in the ANCHoR System, beyond the current four modules: Outreach, Assessment, Residential and Service Planning (O.A.R.S.).

In discussing new modules, Kirby Smith suggested looking at the core functions and modules to enhance what is already there in the O.A.R.S., in other words, perhaps to focus on enhancing the programming of the already existing modules, rather than writing out a whole new module. This idea was well received by the test sites and discussion along these lines began to flow.

From throughout the room suggestions came forth: more assessment functionality stated Boston, Camden and New York; a brief assessment is proposed by Chicago; more selective security options in the assessment module says Louisville and New York; enhanced referral mechanism says Baltimore; add client functionality assessment says Chicago; add cost of service information says Grand Rapids; shelter bed vacancy information says Baltimore, Denver and Louisville; more data on drug abuse says Denver; more behavioral health information requests Grand Rapids; eligibility information suggests Chicago, Denver, Louisville, New York and Savannah; outcomes measurements from Grand Rapids and Savannah.

Ideas continued to pour forth and a final list of the top priorities was drafted:

1. Residential Services revisions.
2. Family Intake procedures and methods.
3. Quick Assessment.
4. Security at the provider's separate service program levels.
5. Eligibility information.
6. Setup wizard for drop-down boxes.
7. Information and Referral screens about community resources.
8. Health, Behavioral, Drug.
9. Security on the sub-module elements of the Assessment module.
10. Outcomes Measurements.

The meetings then proceeded into additional site-specific presentations. These presentations focused on four major topic areas: Community Readiness and Training, Data Sharing and Confidentiality, State-wide Expansion, and Varying ANCHoR Setups. All four of these topics are elements of an effective community ANCHoR System Implementation and Installation plan. The four cities presenting, respectively, were Chicago, Boston, Denver and Baltimore.

Chicago was the first to present their topic: Community Readiness and Training. The presentation and discussion focused on how a community would go about preparing themselves for the implementation of ANCHoR. The most important element in the preparation phase, before even bringing ANCHoR into a community, is community-wide discussion on the benefits of greater coordination of services, greater communication between service providers and greater ease and movement of clients through the system

(more efficient record-keeping and reduction of redundant data collection). Agreements are drafted on confidentiality: both between client and provider, and between the ANCHoR server and provider, on procedures and protocols for data management, on which modules will be operated at which providers, on what data will be universally collected by all providers, and when will sites choose to have greater freedom in selecting only certain data elements to collect. (X)

Chicago chose to provide most of its training on-site. They hired special social worker consultants to go in and proceed with Windows® training and then ANCHoR training. Following such training, they also decided to implement a Peer Utilization Review and a Quality Assurance team. Other cities entered the discussion and offered their own stories about different training strategies and what methods have brought the greatest success. The overall finding was that there are many methods to choose from, and what's most important is to realize that there are these choices, and pick the one that is most appropriate for your locale. (X)

The next presenting city was Boston. Their topic was Data Sharing and Confidentiality. Their number one problem has been the reconciling of divergent interests in the Boston community. The Shelter Alliance, the lead organization bringing ANCHoR to Boston, is an advocacy organization, not a service provider. They want aggregate de-identified data. Service providers, however, are interested more in internal management. These divergent interests lead to problems when recruiting providers and negotiating confidentiality and data issues.

Other problems arise when comparing the interests of those organizations serving families and those serving individuals. In Boston, generally families are referred to service providers via the public welfare system. Hence, these families have expressed serious concern over having their data collected and stored and so readily accessible. However, it appears that singles are more adjusted to the data collection process. We believe that this may be the case since many of our singles population are referred from substance abuse programs and jails, where the single person has become accustomed to answering many questions.

In general the discussion from the beta test site participants focused with concern about adhering to local, state and federal laws when dealing with confidential client information. (X)

The third presentation, State-wide Expansion, was led Denver. In Colorado, the state would like to see the ANCHoR system expand into other areas, e.g. drug and alcohol, family, and mental health issues.

Denver has tried to encourage long-term financial planning when discussion of ANCHoR is presented. They are considering the implementation of some sort of ANCHoR user fee, where fees collected from larger paying agencies could be used to subsidize smaller non-profits desiring ANCHoR, but unable to manage the start-up costs.

The fourth and final presentation topic, Varying ANCHoR Setups, was presented by Baltimore. Baltimore has an ideal, easy-to-manage system. With all providers dialing into a central server located in city government offices, it is easy for the ANCHoR Server Administrator to manage the sharing of data between providers.

Baltimore was able to have all of their providers consent to universal sharing. With this agreement, the setting up of the sharing system has been very simple. Each provider has a PC which operates as a terminal with which the provider may dial into the ANCHoR server and then proceed to review and enter records on clients served. There is no file transfer as all data entry is done virtually in 'real time.'

This lack of file transfers frees up much of the ANCHoR Server Administrator's time. The only concern is the management of the provider's dial in connection to the communications server. The Baltimore setup has 35 providers operating remotely with 10 phone lines available to dial in to the server. The communications software allows the management of user security and the operating of separate Windows® sessions, each with separate memory allocations. As the communications software allows the almost simultaneous transmission of computer keystrokes, the end user feels as if they are operating 'live' on their own PC in a Windows® environment. Baltimore estimates that maintenance of these communications sessions requires an estimated 10 hours per week.

Future expansion of the system to include additional providers will be easy, says Baltimore. The provider will have a PC installed, one with minimal power, since the PC itself need only operate as a terminal to access the ANCHoR server. Then, if necessary another phone line can be installed at the server site, and as the overall size of the server database grows, additional hardware may be purchased to accommodate the increased need for data storage.

Many of the sites were excited to hear of Baltimore's success and were eager for greater detail on how they too might set up ANCHoR similarly in their home community for the long-term. Baltimore stated that they welcome any visitors interested in viewing the ANCHoR System.

After the conclusion of the fourth topic presentation, the meeting opened up to entertain discussion on future funding of the ANCHoR System. All sites were hopeful that some level of government assistance may be able to be gained, especially when it was considered how helpful the ANCHoR System could be in generating the information necessary for completing government grant applications designed to assist communities in providing greater social services to those in need.

Further questions surrounded the release date of ANCHoR Version, 1.0 and how strongly the government would proceed in promoting and continuing in its support of the ANCHoR System, especially in the form of technical assistance in implementation and operation of the system.