

Managing project expectations in human services information systems implementations: The case of homeless management information systems [☆]

Oscar Gutierrez ^{a,*}, Donna Haig Friedman ^b

^a *Department of Management Science and Information Systems, College of Management, University of Massachusetts Boston, Boston, MA 02125, United States*

^b *Center for Social Policy, McCormack Graduate School of Policy Studies, University of Massachusetts Boston, Boston, MA 02125, United States*

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Abstract

Complex information management implementation projects develop cyclical downturn patterns that, if not managed effectively, can throw them off course. These cycles are intrinsically related to contradictions that are normally embedded in the project's goals and expectations. The position presented in this article is that managing these cycles is more effective than attempting to eradicate them. Human services information systems are examples of systems that embed enormous contradictions. This paper uses the context provided by homeless management information systems to present a model of project management evolution. It explains how the cyclical pattern presented here can be used as a learning model that recognizes the limitations of deterministic project management thinking and the value of deferral planning, experimentation and balancing. The paper proposes a strategy to deal with this. © 2005 Published by Elsevier Ltd and IPMA.

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1. Introduction

Human Services Information Systems (HSIS) are a category of information management resources with the following characteristics: they address issues and populations that are normally associated with poverty or disadvantage; they involve large numbers of stakeholders for their development; there are considerable

numbers of privacy laws that apply to their deployment and use; the economic equation for these systems is normally based on government or philanthropic sources of funding versus outcome assessment; the providers of human services rarely support information management initiatives; and they are normally run and operated by a social sector with very scarce resources. Homeless Management Information Systems (HMIS), a subset of HSIS, expose all these characteristics in a form that accentuates the challenges. For example, most human services organizations address technical system operation through conventional training programs. However, emergency homeless shelters have tremendous staff turnover rates that make conventional training programs outmoded.

Homeless Management Information Systems are highly distributed client and case management applications that support the provision of housing and other

[☆] The observations on the two cases described here reflect the 'insider' perspectives of the authors in these studies. Specifically, the authors were consultants to Seattle/King County, WA in the initial phase and continue to provide technical assistance to this community currently. The authors had direct project management responsibilities for the Massachusetts' HMIS in the initial phase and a less direct, but nonetheless influential, role in this implementation since that time.

* Corresponding author. Tel.: +617 287 7885; fax: +617 287 7725 (O. Gutierrez)/Tel.: +617 287 5565 (D.H. Friedman).

E-mail addresses: oscar.gutierrez@umb.edu (O. Gutierrez), donna.friedman@umb.edu (D.H. Friedman).

services to individuals and families experiencing homelessness; they address the data management needs of human services agencies that attend to this population and are often used for reporting purposes to government and other funding agencies. Comprehensive use of HMIS in the United States has been in place since the early 1990s by a handful of communities. Most notably are the states of Massachusetts and Wisconsin, and the Cities of Spokane, Washington, St. Louis, Missouri and Columbus, Ohio. In 2000, the US Congress passed a directive [1] to the US Department of Housing and Urban Development (HUD) requiring the submission of an Annual Homeless Assessment Report (AHAR). This report, the first version of which is due in 2005, is expected to provide an objective assessment on the number of homeless individuals and families and the status of homelessness in America. The HUD mandate has given considerable impetus for communities normally referred to as Continuum of Care (CoC) around the United States to plan and begin implementation of HMIS. The country's CoCs have approached HMIS implementation in a variety of ways. While some have conducted their own implementation plans, the majority of CoCs have joined a regional or state-wide initiative. With equal impetus there have been developments in HMIS applications by communities and by commercial software applications development organizations. The HUD directive has had an impact on the speed with which communities are moving forward on HMIS implementation. As of 2002, 74% of CoCs reported to HUD that they were in a planning phase and had no HMIS in place; by 2003, nearly two-thirds (61%) reported that they had moved into a full-scale HMIS implementation phase.

This paper is organized in three parts. The first part describes specific and typical challenges found in HMIS project management. The second part explains the cyclical patterns of HMIS projects. This research indicates that these types of projects undergo a predictable series of ups and downs on their paths to full implementation. This section explores this project management cycle and provides explanations to some of the causes for the ups and downs, utilizing two illustrative case studies of HMIS implementations in the United States. The first is a state-wide implementation in Massachusetts and the second is the implementation in the city of Seattle and King County. The third part of the paper describes tactics that successful project managers have employed in dealing with contradictory project goals. These tactics are combined here into a proposed strategy for dealing with project contradictions.

2. Challenges facing HMIS project management

HMIS projects are challenging for four main reasons. First, they pose technical requirements on communities

of stakeholders that seldom match available expertise. Homeless assistance organizations are concerned with addressing the most basic survival needs of their clients. Case managers are often drawn from the ranks of service recipients, and using computers as part of the service process is very counter-intuitive for them. Some organizations have fully staffed MIS departments who oversee all aspects of their organization's information systems technical infrastructure. Other organizations are smaller service programs within each CoC whose technical infrastructure is limited to the use of phones and fax machines. In these programs, all client records are in paper form. Indeed, in some remote locations, Internet connections cannot be made in contiguous geographic areas. A daunting challenge for each CoC is to figure out how to deal with these wide variations so that all programs, at each level of technological sophistication and capacity, will contribute data to the centralized HMIS database.

Second, diverse interests and groups, sometimes in conflict, must cooperate to bring the HMIS to full implementation. Characteristically, advocates and government officials struggle over the size of the homeless problem and the locus of responsibility for solving it. Advocates must make the case that the problem is big enough to warrant government attention and resources, while government officials often minimize the problem and point to the private sector, to local communities or to the next lowest level of government for solutions and resources [2]. The kind of project management organization that a typical HMIS implementation represents fits in with what Gillard [3] describes as a tri-dimensional organization. This framework, applied to HMIS projects, suggests the importance of three organizational dynamics: (a) the project office: the HMIS central project organization; (b) intra-organization: the user community within multiple and distinct agencies; and (c) inter-organization: government and funding agencies, advocacy groups, HMIS oversight boards or committees and the community at large. Similarly, following Evaristo and van Fenema's [4] typology of project management, most HMIS projects could be classified as "multiple distributed projects".

Third, HMIS projects deal with issues concerning highly sensitive data that require securing and protecting the privacy of individuals whose data are held in the database. Agencies using the most advanced HMIS tools select among several approaches to handling client identity. The three most common client identification approaches employed by advanced HMIS networks today illustrate variations in philosophy and technology: a derived client code; a system-generated client key; or a photographic, finger printing or scannable bar code ID [5]. These approaches are chosen as vehicles for facilitating coordination of services, while protecting clients from unauthorized, harmful exposure. Clients and staff

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