# PARTNERS FOR MINISTER STORES

# HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) Atlanta Continuum of Care Data Quality Plan

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# **Definitions and Acronyms**

CE Coordinated Entry

ClientTrack Georgia's HMIS

CoC Atlanta Homeless Continuum of Care (AHCoC) (Per Atlanta CoC Charter

12-11-20); Partners for HOME serves as the local CoC Lead Agency

(see also CoC HMIS Administrator); GA-500

DQ **Data Quality** 

**DQIP** Data Quality Improvement Plan

**GAHMIS** Georgia Homeless Management Information System

HIC **Housing Inventory Count** 

**HMIS** Homeless Management Information System

**HMIS Lead** Georgia Department of Community Affairs (DCA)

(Per GAHMIS MOU approved 2/26/20)

**HMIS Agency** Primary contact between home agency and Atlanta CoC HMIS Administrator

Administrators. Every agency, both participating and nonparticipating, is required to inform the CoC who the HMIS

Administrator will be.

HUD Department of Housing and Urban Development

**COC HMIS** The CoC HMIS Administrator is selected by the respective CoC **ADMINSTRATOR** 

management. The CoC HMIS Administrator is responsible for

providing support to the agencies within their respective CoC. This support may consist of troubleshooting, additional training, communicating policies and procedures, monitoring data quality, assisting with federal reporting requirements and working with

the System Administrators and the HMIS Lead. (Per GAHMIS Policies and Standard Operating Procedures 4-15-21) PFH serves as the local CoC

HMIS Administrator.

PFH Partners for HOME

#### 1. INTRODUCTION

#### **BACKGROUND**

The Homeless Management Information System (HMIS) Data Standards have been jointly established by the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services (HHS), and the U.S. Department of Veterans Affairs (VA) to allow for standardized data collection on individuals and families experiencing homelessness and receiving assistance from programs funded by these federal partners.

A Homeless Management Information System (HMIS) is the information system designated by a local Continuum Care (CoC) to comply with the requirements of CoC Program interim rule 24 CFR 578. It is a locally administered data system used to record and analyze client, service, and housing data for individuals and families who are homeless or at risk of homelessness.

HMIS is administered by the U.S. Department of Housing and Urban Development (HUD) through the Office of Special Needs Assistance Programs (SNAPS) as its comprehensive data response to the congressional mandate to report annually on national homelessness. It is used by all projects that target services to persons experiencing homelessness within SNAPS and the office of HIV-AIDS Housing. It is also used by other Federal Partners from the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Veterans Affairs and their respective programs to measure project performance and participate in benchmarking of the national effort to end homelessness. From the most current version of HMIS Data Standards posted at FY 2022 HUD Data Standards Manual

In May of 2021, HUD published the <u>FY 2022 HUD Data Standards Manual</u> and the <u>FY-2022-HMIS-Data-Dictionary</u>, the current HMIS Data Standards at the time of this document's creation. The <u>FY 2022 HUD Data Standards</u> <u>Manual</u> went into effect October 1, 2021, and remains in effect unless and until updated.

NOTE All projects and programs entering data into HMIS, regardless of funding source, are required to provide data consistent with these standards.

#### WHAT IS DATA QUALITY AND WHY DOES IT MATTER?

Data quality is the extent to which the information contained in HMIS accurately represents the real-world clients and situations it is meant to describe.

High-quality data within HMIS is integral to all work towards ending homelessness because it:

- Provides a clearer understanding of homelessness within the community, which:
  - Allows for data-informed decisions at both the project- and system- levels;
  - Enables a CoC, and projects within a CoC, to tell the story of homelessness as realistically and completely as possible for use in advocacy and community education;
- Provides direct care staff with immediate access to important client information that can streamline daily activities and may result in improved service delivery and prompt referrals for clients;
- May directly affect clients through the Coordinated Entry process and may determine which services they may or may not appear to be eligible for;
- Results in more accurate and complete reports for funders and stakeholders, which can affect:
  - Meeting the requirements for CoC and other federal funding streams;
  - o The funding opportunities providers apply for;
  - A provider's ability to obtain funding to provide needed services to individuals at risk of and/or experiencing homelessness and;
  - System-level performance as it relates to the HUD Notice of Funding Opportunity (NOFO). Partners for HOME uses the reallocation process to ensure all renewing projects are cost-effective and in line with HUD's guidelines and recommendations to end homelessness. The reallocation process allows the CoC to direct funding away from grants that are underutilizing resources and allow those resources to be redirected to where they can be better used. Projects with two consecutive years of corrective planning status may be at risk of losing these funds per the recommendation of the Rank and Review Committee.

#### WHAT IS AN HMIS DATA QUALITY PLAN?

An HMIS Data Quality Plan is a system-wide document that supports a CoC to achieve statistically valid and reliable data in their local HMIS. The plan intends to accomplish the following:

- Identify the responsibilities of all parties within the CoC with respect to HMIS data quality;
- Establish specific data quality standards for timeliness, completeness, accuracy, and consistency;
- Describe the procedures for implementing the plan and monitoring progress toward meeting data quality standards, including:
  - Defining how improvement opportunities in data quality are addressed; and
  - o Establishing timelines for monitoring data quality on a regular basis.

### 2. THE ATLANTA COC DATA QUALITY PLAN

#### **PURPOSE**

The Atlanta CoC Data Quality Plan has been developed to provide actionable, measurable steps to address data quality within the Georgia Homeless Management Information System (GA HMIS). This document, Atlanta's Data Quality Plan, complies and aligns with both the GA HMIS Policies and Standard Operating Procedures and the GA HMIS Data Quality Plan.

#### **OVERVIEW**

The Atlanta CoC Data Quality Plan begins by identifying the data entered into HMIS, and then explains the quality standards and goals set forth by the CoC and GA HMIS for this data. The plan addresses the various components of data quality – completeness, timeliness, accuracy, consistency, coverage, and utilization – and provides the standards (minimum requirements) that HMIS-participating agencies entering data into HMIS must meet. Finally, the plan provides how data quality will be monitored and how the Atlanta CoCs will incentivize and enforce these standards. Attachments to this plan include an HMIS Monitoring Tool for project monitoring, and an outline of a Data Quality Improvement Plan for use in situations where an agency's data quality consistently has room for improvement and the agency requires extra assistance to meet data quality standards.

#### PARTICIPATION EXPECTATIONS

All federally funded homeless services projects are required to use HMIS and must meet certain data quality expectations to ensure accurate reporting for those grants. However, as all projects in HMIS contribute to the overall picture of homelessness within the Atlanta CoC, all projects in HMIS will be expected to meet applicable standards in the Atlanta CoC Data Quality Plan, regardless of funding source.

All agencies with projects, and persons (the end user) entering data, in HMIS are required to sign the GA HMIS Agency Participation Agreement and GA HMIS End User Participation Agreement, respectively. These agreements require the agency and/or end user to read and understand the GA HMIS Policies and Standard Operating Procedures and abide by the processes and standards provided within it, including data quality.

Agency leadership will be responsible for ensuring that data entry by users is being conducted in a timely manner and will ensure the accuracy of the data entered. Data may also be used to measure program efficacy, which influences funding opportunities during competitive funding processes such as the annual Continuum of Care application to HUD or annual ESG applications.

Per the <u>GA HMIS Policies and Standard Operating Procedures</u>, each agency in HMIS "must designate a staff member to be the GA HMIS Agency Administrator who is responsible on a day-to-day basis for enforcing the data and office security requirements under these Policies and Standard Operating Procedures".

Atlanta HMIS Agency Administrators are responsible for the following:

- Serve as the primary contact between home agency and Atlanta CoC HMIS Administrators; as such they will submit and manage helpdesk tickets on behalf of their organization
- Communicate to Atlanta CoC Administrators when end users need to be removed from ClientTrack upon termination of employment from agency (Atlanta CoC HMIS staff will provide a monthly active user list to Agency Administrator for confirmation/updates)
- Maintain quality and accuracy of client data, user data, and agency administration information
- Ensure Privacy Posting is posted and visible to all clients
- Monitor and enforce compliance with client confidentiality standards and ethical data collection, entry, and

retrieval at the agency level

- Communicate project and funding updates and changes to Atlanta CoC HMIS Administrators (including changes to bed/unit inventory)
- Monitor agency submitted issue tickets
- Review project setup forms and custom report requests with agency staff member (*if being submitted by other staff member*)
- Monitor and manage Coordinated Entry vacancies (if participating in CE Provider and/or CE Assessor access)

This Atlanta CoC Data Quality Plan is a living, evolving tool that will change as the community and its HMIS data needs change. Most changes will be discussed with HMIS participating agencies prior to being implemented to secure agency buy-in. As changes are made, providers will need to sign an updated Agreement.

#### **ROLES AND RESPONSIBILITIES**

The Atlanta CoC Data Quality Plan sets expectations for the Atlanta CoC, Partners For HOME (PFH) as the CoC Lead and CoC HMIS Administrator, participating agencies, and end users to ensure valid and reliable data is captured on all persons accessing homelessness services in the Atlanta CoC.

PFH will work with all projects to ensure they have access to the tools they need to achieve high data quality. This includes training and data quality reports for monitoring, opportunity for HMIS participating agencies to have representation on Atlanta's Data Quality committee, as well as incentives to maintain a high level of data quality and accountability for non-responsiveness to data quality concerns. PFH is charged with ensuring agencies respond to and act upon data quality concerns appropriately to ensure that the overall data quality within HMIS is acknowledged and improved in an ongoing, objective, and data-driven manner. PFH will work to ensure that targeted assistance is provided, and data corrections are carried out by the agency and/or end-user in a timely manner.

# 3. DATA QUALITY STANDARDS

# PURPOSE

The following data quality standards are the minimal standards to be met by all agencies entering data into HMIS. When data quality standards are met, reporting is more reliable and can be used to evaluate service delivery, project design and effectiveness, and efficiency of the system.

# **Quick Chart View**

Data Type	Benchmark (Minimum)
Project Descriptor Data Elements (Completeness)	95%
Universal Data Elements (Completeness)	95% *
Project Specific Data Elements (Completeness)	95%
Timeliness (Documentation entered/updated within 48 operating hours)	95%
Accuracy	100%
Consistency	100%
CoC System Bed Coverage in HMIS – Federally Funded	100%
CoC System Bed Coverage in HMIS – Non-Federally Funded	85%
Bed Utilization (ES)	65% - 105%
Bed Utilization (RRH)	85% - 105%
Bed Utilization (PSH)	85% - 105%

<sup>\*</sup>Street Outreach Projects - Only applies after client has a Date of Engagement

#### PROJECT DESCRIPTOR DATA ELEMENTS

#### **Definition and Importance:**

The Project Descriptor Data Elements (PDDEs), as defined by HUD, contain basic information about projects in HMIS and help ensure HMIS is a consistent and comprehensive database of information about homelessness. The PDDEs are the 'building blocks' of HMIS. They enable HMIS to:

- Associate client-level records with the various projects in which clients will enroll in across project types;
- Clearly define the type of project the client is associated with the entire time they received housing or services;
- Identify which federal partner programs are providing funding to the project; and
- Record bed and unit inventory and other information, by project, which is relevant for the Longitudinal SystemAnalysis (LSA), System Performance Measures (SPMs), Housing Inventory Counts (HIC), Point In Time (PIT)counts, and bed utilization reporting.

Agencies should refer to HUDs PDDE guidance for details on when changes to PDDE data elements must be reported; take particular note of 2.06, as it may require creation of a new project in HMIS, and 2.07, as only specific changes to bed/unit inventory need to be reported. FY 2022 HUD Data Standards Manual

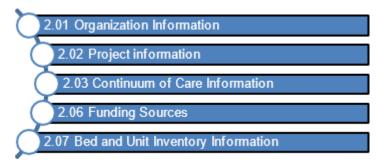
#### **Standards/Minimum Requirements:**

PDDEs are entered and managed by the CoC HMIS Administrator in collaboration with each agency with a project in HMIS, not the end users. They are created at initial project setup within HMIS, updated as changes occur to project or funding, in addition to reviewing on an annual basis with the CoC HMIS Administrator.

HUD requires that the CoC (typically via the HMIS Lead Agency) collect project descriptor information in the HMIS for:

- All continuum projects within its jurisdiction participating in HMIS by collecting and entering client-level data.
- All residential continuum projects, regardless of their participation in HMIS. This is to facilitate AHAR participation. If the HMIS database includes client and service data entered by non-continuum projects (e.g., food pantries or other services that might be used by people who are not experiencing homelessness), the continuum must identify them as such using the PDDEs to ensure that data are excluded from required reporting on continuum projects.

The required PDDEs are the following, with each comprised of multiple sub-elements of project information:



Agencies are required to notify the CoC HMIS Administrator of any project and funding updates and changes (including changes to bed/unit inventory) by the 5<sup>th</sup> business day of month immediately after update/change occurs. Updates and changes to PDDEs can be communicated to the CoC HMIS Administrator by submitting an Issue Ticket in ClientTrack (Georgia's HMIS).

#### **UNIVERSAL DATA ELEMENTS**

#### **Definition and Importance:**

The Universal Data Elements (UDEs), as defined and mandated for collection by HUD, establish the minimum data collection requirements for all homeless housing and/or service projects entering data into HMIS, regardless of funding source.

At this time, there is no requirement that client consent be obtained to enter client information into HMIS. There is only a requirement that client consent be obtained to share information entered into HMIS with one or more other HMIS participating providers.

The Universal Data Elements are the foundation on which the Longitudinal System Analysis (LSA) is developed, which informs the Annual Homeless Assessment Report (AHAR). These elements collect information on the basic demographics of the population being served, including personally identifying information (PII), and therefore are critical to an HMIS's ability to produce unduplicated estimates of the number of people at-risk of or currently experiencing homelessness. Additionally, these elements provide information about access and use of homeless assistance projects, including patterns of service use, information on shelter stays, and episodes of homelessness over time.

#### **Standards/Minimum Requirements:**

All projects participating in HMIS are required to collect the UDEs, regardless of funding source. The Personally Identifiable Information (PII) and UDEs (3.01 through 3.07) must be collected once per client, regardless of how many project stays that client has in the system. The remaining UDEs (3.08 through 3.917) are to be collected at least once per project stay. A full description of UDEs can be found in the FY 2022 HUD Data Standards Manual

Data Element	
3.01 Name	3.10 Project Start Date
3.02 Social Security Number	3.11 Project Exit Date
3.03 Date of Birth	3.12 Destination
3.04 Race	3.15 Relationship to Head of Household
3.05 Ethnicity	3.16 Client Location
3.06 Gender	3.20 Housing Move-in Date
3.07 Veteran Status	3.917 Living Situation
3.08 Disabling Condition	

#### PROGRAM SPECIFIC DATA ELEMENTS DEFINITION AND IMPORTANCE:

#### **Definition and Importance:**

The Program Specific Data Elements (PSDEs) have been designed by HUD to allow projects that receive funding from any HMIS Federal partner, such as the U.S. Department of Health and Human Services (HHS) or the U.S. Department of Veterans Affairs (VA) to meet the statutory and regulatory data collection and reporting requirements of these programs. HMIS is required to provide for the collection of these data elements in support of these projects,

PSDEs, as defined by HUD, provide additional information about the characteristics of clients, the services they are provided, and program outcomes. Many of these data elements represent repeated transactions and were designed to collect information that may change over time.

#### Standards/Minimum Requirements:

PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence. Not all PSDEs are required for collection by all projects, and some HMIS-participating projects may only collect the UDEs and not collect any PSDEs at all. The <a href="https://exchange-Federal Partners landing-page">HUD Exchange Federal Partners landing page</a> serves as a gateway to the manuals that provide the specific PSDE data collection requirements per program and HMIS project type.

HMIS-participating agencies are encouraged to actively work with CoC HMIS Administrators to ensure that they collect the information required by their funders at all appropriate event occurrences.

The "Common Program Specific Data Elements", which are the PSDEs that are collected across most Federal Partner programs, along with PSDEs required by each Federal Partner can be found in the <u>FY 2022 HUD Data Standards Manual</u>.

				Collection Po	oint	
		Project Start	Occurrence	Update	Annual Assessment	Project Exit
	4.02 Income and Sources	Х		Х	Х	Х
	4.03 Non-Cash Benefits	Х		Х	X	Х
	4.04 Health Insurance	Х		Х	X	Х
	4.05 Physical Disability	Х		Х		Х
	4.06 Developmental Disability	Х		Х		Х
DE	4.07 Chronic Health Condition	Х		Х		Х
PS	4.08 HIV/AIDS	Х		Х		Х
non	4.09 Mental Health Problem	Х		Χ		Х
Common PSDE	4.10 Substance Abuse	Х		Х		Х
ပိ	4.11 Domestic Violence	Х		Х		
	4.12 Current Living Situation		Х			
	4.13 Date of Engagement		Х			
	4.14 Bed-Night Date		Х			
	4.19 Coordinated Entry Assessment		Х			
	4.20 Coordinated Entry Event		Х			

#### USAGE OF CLIENT REFUSED AND CLIENT DOESN'T KNOW RESPONSE OPTIONS

Most required HMIS data elements provide for the options of "Client doesn't know" or "Client refused" to be recorded for the client's response. These options are considered poor data quality but are provided to allow a response to be recorded for required elements within an assessment when these situations do occur, so a client may still be provided assistance. These are never to be used in place of asking a client for information, or in a situation where information was not collected. As described by the FY 2022 HUD Data Standards Manual<sup>1</sup>:

It is not the intention of the Federal Partners that clients be denied assistance if they refuse or are unable to supply the information. However, some information may be required by projects or public or private funders to determine eligibility for housing or services, or to assess needed services.

The "Client doesn't know" or "Client refused" responses should not be used to indicate that the case manager or data entry staff does not know the client's response. Nor are these responses to be assumed without first asking the client to provide the information. Some clients may decline to provide responses to some fields but case managers or data entry staff may not make that decision for them. At a national level, in every project type, a majority of clients are willing to provide identifying information. If a project is experiencing a high rate of client refusals as compared to similar projects, CoCs will consider implementing trainings around interviewing or trust-building techniques to support client engagement. A deeper engagement with clients may lead to more rapid movement off the street and placement in housing, consistent with meeting federal goals to end homelessness and improvement on HUD's System Performance Measures.

#### MISSING DATA RESPONSES

"Missing data" is a category that represents all invalid and null responses to a required data element in HMIS. As

 $<sup>^{\</sup>mbox{\tiny 1}}$  Refer to Appendix for instructions to access document.

described by the FY 2022 HUD Data Standards Manual:

The HMIS Data Standards assume that fields for which data are not collected will be left blank (i.e., 'missing'). In situations where a system requires a response to all data fields before saving a record, the system must use a specific response category to indicate that data were not collected. "Data not collected" continues to be identified as a response option in these HMIS Data Standards. It is not a response option necessary in every system or in every element. The element is required for use by any HMIS system which requires a response to an element before allowing the user to move forward in the system. Adding the response option of "data not collected" enables a user who did not collect or simply does not have the information to enter a response that does not present a false answer. HMIS systems which require entry of any element for the system to progress must implement the "data not collected" response for all elements that require a response. "Data not collected" must equate to missing data or null values as appropriate for transfer and reporting purposes.

#### FOUR COMPONENTS OF DATA QUALITY

HUD identifies data quality as having four components: completeness, timeliness, accuracy, and consistency. These components are defined below, and how they are monitored is described later in this document.

Completeness	Timeliness	Accuracy	Consistency
All clients entered  Complete identifying data entered	Data are entered soon after collected  Changing data are kept up to date	Truthfulness from clients  Accurate data entered by staff	Common interpretation of questions  Common interpretation of client answers
Complete characteristics fields entered  All services entered	•	,	Common knowledge of what fields to answer
Complete exit data entered			

#### 3.7.1 COMPLETENESS

"Are all of the required data elements for clients served recorded in HMIS?"

#### **Definition and Importance:**

Data Completeness is the percentage of data fields for any given client, project enrollment, provider, agency, or system that are filled in or answered. The definition used in the CoC Data Quality Brief is: "The degree to which all required data is known and documented."

Incomplete or missing data always consists of null and "data not collected" values, and may include "client doesn't know", "client refused", and/or "other" values for some data elements.

Complete data is critical to finding the right services for clients to end their homelessness experience. Incomplete data can negatively impact the CoCs' ability to make population-level assessments, analyze patterns in client information, identify changes within the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG-funding, and low HMIS data quality scores may impact renewal funding or future funding requests.

#### Standards/Minimum Requirements:

Data completeness is evaluated to ensure agencies are completing records to the best of their ability. This includes updating records and, as additional client interactions take place, entering new information learned. The Atlanta CoC encourages all HMIS-participating agencies to aspire to 100% collection of all data elements (Universal and Program Specific) but recognize that 100% data completeness may not be realistic or possible in all cases.

Ultimately, the encouragement to take ownership of quality data is agency driven, therefore, the CoC has created a minimum requirement of 95% for project data completeness.

#### 3.7.2 TIMELINESS

"Is the required client information entered into HMIS within the required period of time?"

#### **Definition and Importance:**

Data timeliness is the length of time between when HMIS information is collected and when that information is entered into HMIS. Data timeliness cannot be edited, it can only be improved going forward.

Entering data into HMIS in a timely manner is necessary to ensure that clients receive or make connections to the services they need in a quick and efficient manner. Timely data entry also ensures that data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Finally, when data is entered in a timely manner, it helps reduce human error that can occur when too much time has elapsed between the data collection/service transaction and the data entry.

#### Standards/Minimum Requirements:

The Atlanta CoC encourages all agencies to aspire to 100% of data being entered into HMIS in a timely manner. However, the CoC recognizes that this may not be realistic or even possible in all cases, and therefore have created the following minimum requirements for data timeliness based on HMIS project type:

HMIS Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in HMIS)
Coordinated Entry	Entry	Within 48 operating hours of a client contact/service
	Exit	Within 48 operating hours of a client contact/service
Homelessness	Entry	Within 48 operating hours of a client contact/service
Prevention	Exit	Within 48 operating hours of a client contact/service
Emergency Shelter –	Entry	Within 48 operating hours of a client contact/service
Utilizing only an	Exit	Within 48 operating hours of a client contact/service
entry/exitworkflow		(Back date to date of last shelter night stay, the
		morning of the day the client did not return)
Emergency Shelter –	Entry	Within 48 operating hours of a client contact/service.
Utilizing only an Night by Night	Exit	Within 48 operating hours of a client contact/service
workflow		(Back date to date of last shelter night stay, the
		morning of the day the client did not return)
Permanent Supportive	Entry	Within 48 operating hours of a client contact/service

Housing	Exit	Within 48 operating hours of a client contact/service
Rapid Rehousing	Entry	Within 48 operating hours of a client contact/service
	Exit	Within 48 operating hours of a client contact/service
Street Outreach	Contacts	Within 48 operating hours of a client contact/service
	Exit	Live time or within 48 operating hours of project exit
	(Formal Project Exit)	
	Auto-Exit	After 90-days of no contact, project exit needs to be
	(No-contact Exit)	recorded within 48 operating hours
		(Back-dated to date of last contact)
Supportive Services	Entry	Within 48 operating hours of a client contact/service
Only (excludes	Exit	Within 48 operating hours of a client contact/service
Coordinated Entry)		
Transitional Housing	Entry	Within 48 operating hours of a client contact/service
	Exit	Within 48 operating hours of a client contact/service

#### 3.7.3 ACCURACY

"Does HMIS data accurately reflect true client information?" and

"Are all of my clients in HMIS/In the correct project?"

#### **Definition and Importance:**

Information entered in HMIS needs to accurately represent the clients who are served by any homeless service projects contributing data to HMIS. Inaccurate data, sometimes referred to as incongruent data, is evaluated at both the client and household levels, and highlights data elements that appear to rationally conflict with one or more other data elements.

Data accuracy is not easy to manage or monitor and requires specific reports that look at congruency between and among responses to data elements within the system, as well as checks between what the client has told an intake worker and what data is entered into HMIS. Additionally, the <a href="Longitudinal System Analysis Guide">Longitudinal System Analysis Guide</a> (see Appendix A in the LSA Guide) looks at specific data quality measures in relation to the community-wide report submission to HUD on an annual basis.

PFH will work with projects to review annually, the data collected directly from clients, and the data entered into HMIS to ensure that the data entered into HMIS matches the client's reality.

#### **Standards/Minimum Requirements:**

**External Record Standard**: It is expected that 100% of client physical records match the client's HMIS data record, but a minimum of 95% is acceptable.

**Quarterly Correction Standard**: Due to the complexity of data accuracy, specific standards have not been developed. Some amount of data incongruity may be reasonable depending on a client's or a household's situation; however, providers should strive to minimize data incongruity that occurs without explanation to help ensure the data reported is accurately reflecting the state of homelessness in Atlanta.

Instead, timely corrections/updates to the following data elements, if and as necessary, are expected of all project types and all data entered into HMIS on a quarterly basis (as per the usual monitoring process):

UDE Accuracy Measure	Data Element(s) Involved	Accuracy Test			
Date of Birth <> Project	3.03 Date of Birth	3.03 is not the same date as 3.10 for Heads of			
Start Date	3.10 Project Start Date	Household			
Household Error	3.15 Relationship to Head of Household	At least one, and only one, Head of Household per household (no HoH is an error, multiple HoH is an error)			
		No infant or young child Heads of Household (under X years of age)			
	3.917 Prior Living Situation				
	Length of time in previous place				
Prior Living Situation and	Approximate date homelessness started	Dependencies (Approx. Date, Time, and			
Dependencies are Congruent	Number of times experiencing homelessness in the last three years	Months) answered if 3.917/Length of Time indicate the client came from a homeless			
	Number of months experiencing homelessness in the last three years	situation			
	3.08 Disabling Condition	If Yes to 3.08, then Yes to at least one 4.## and Yes to corresponding Disabling? dependency			
	4.05 Physical Disability				
Disabling Condition has a	4.06 Developmental Disability	.6.			
Source	4.07 Chronic Health Condition	If Yes to Disabling? Dependency for any 4.##,			
	4.08 HIV/AIDS	then Yes to the corresponding 4.##			
	4.09 Mental Health Problem 4.10 Substance Abuse				
Monthly Income has a	4.02 Income	If Yes to 4.02, then Yes to at least one source			
Source	Sources	If a <i>Source</i> is selected, then 4.02 must be Yes			
Non-Cash Benefits has	4.03 Non-Cash Benefits	If Yes to 4.03, then Yes to at least one source			
a Source	Sources	If a <i>Source</i> is selected, then to <i>4.03</i> must be Yes			
Health Insurance has a	4.04 Health Insurance	If Yes to 4.04, then Yes to at least one Source			
Туре	Types	If a <i>Type</i> is selected, 4.04 must be Yes			
Domestic Violence and Dependencies	4.11 Domestic Violence	If Yes to 4.11, dependencies (When and Fleeing) are answered; if No to 4.11, dependencies are not answered			
arecongruent	When experience occurred	If answered, 4.11 is Yes and other			
	Are you currently fleeing	dependency is answered			
Veterans are Not	3.07 Veteran Status	3.07 is not Yes for clients under 18			
Minors	3.03 Date of Birth	years of age			
		, 55 5 405			
	3.16 Client Location				

<b>Client Location is</b>	2.02 Project Information	3.16 for a client enrollment matches
Appropriate to Project	2.03 Continuum of Care Information	2.03 for the project
Project funding sources match clients	2.02 Project Information 2.06 Funding Sources Clients in project	<ul> <li>Specific to a Project – examples include:         <ul> <li>Age(Minor-/Youth-/Adult-only)</li> <li>Household (Singles-/Families-only)</li> <li>Gender (Single-Gender)</li> <li>Veteran (Veteran-dedicated)</li> <li>Disabling Condition Required</li> </ul> </li> </ul>
Housing Move-In Date is Accurate	3.20 Housing Move-In Date 3.1 0 Housing Start Date	Ensure the 3.20 does not predate 3.10

"Are the required data elements being recorded in HMIS in a consistent manner across projects?"

#### **Definition and Importance:**

Data consistency means that data is understood, collected, and entered in the same way across all projects in HMIS. Consistency directly affects the accuracy of data.

#### **Standards/Minimum Requirements:**

**Initial User Training Standard**: All HMIS End Users must complete an initial training before activated in the HMIS system. Additional training opportunities beyond initial training are available and readily offered by the CoC HMIS Administrator.

Training is also offered for end users who do not do data entry, to ensure they understand the purpose and importance of the information they are collecting.

**Monthly Activity User Standard**: End Users must log into HMIS and enter data at least once in a 60-day period to maintain active user status. Users must enter data on a regular and consistent basis to maintain HMIS access to prevent a backlog of data entry and to ensure they maintain familiarity with HMIS and the workflows for which they are responsible. At 6 months of inactivity, users will be required to complete New End User training before the account will be made active.

**User Employment Standard**: The HMIS Agency Administrator is required to inform the CoC HMIS Administrator through the ticketing system within the ClientTrack application of needed changes to the Authorized Agency user accounts. This includes revoking the user account of a terminated employee immediately upon termination of employment. For employees with user access otherwise leaving the agency, the user account should be revoked at the close of business on the person's last day of employment.

#### 4. SYSTEM-WIDE DATA QUALITY STANDARDS

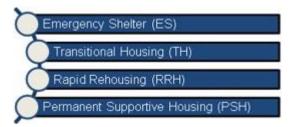
#### **BED COVERAGE**

"To what degree are the beds dedicated to serving clients at-risk of and experiencinghomelessness entered into HMIS?"

#### **Definition and Importance:**

HMIS bed coverage is the number of homelessness services program beds in the CoC's geographic area that contribute data to HMIS.

The following HMIS Project Types contribute to bed coverage:



The importance of a high percentage of HMIS Bed Coverage for all project types is an emphasis of the <u>HUD TA</u> <u>Data Strategy</u>, as a lack of HMIS bed coverage prevents the CoC from truly understanding how both their system and the clients served within their system are functioning.

#### **Standards/Minimum Requirements:**

**Bed Coverage Standard**: The CoC will ensure that bed coverage is as close to 100% as is possible for applicable project types, and the CoC will focus on project types with less than 85% bed coverage for improvement efforts.

#### BED UTILIZATION

"To what degree are the beds in HMIS occupied by clients?"

#### **Definition and Importance:**

Utilization is the number of beds that are filled by a client within a given period of time. Bed and unit utilization analysis is a good way to determine whether the data in HMIS is accurate for the clients served in the project at any given point and if there is a possible deficiency in exiting clients from the project in a timely manner (over-utilization) or entering clients into the project in a timely manner (under-utilization).

#### Standards/Minimum Requirements:

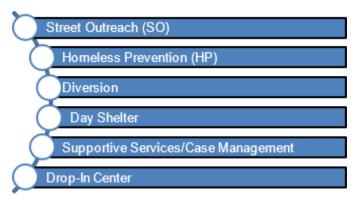
Bed Utilization Standard: Agencies are expected to have an 85-105% bed utilization rate.

#### **HOMELESS RESPONSE SYSTEM COVERAGE**

"Are all of the clients we serve entered into HMIS?"

#### **Definition and Importance:**

The homeless response system includes other types of projects that provide homelessness services but do not provide lodging to clients. If any service project types are dedicated and/or prioritized to serve clients at-risk of or experiencing homelessness in the community, the goal is for the data to be entered into HMIS for clients served. The following types of projects that do not have beds/units associated:



A high percentage of HMIS Homeless Response System Coverage is imperative for the community to understand the various ways in which a client is entering the homeless response system beyond projects that provide beds/lodging for clients.

#### **Standards/Minimum Requirements:**

The CoC will work to ensure that system coverage is as close to 100% as possible for all project types.

#### 5. DATA QUALITY MONITORING

#### **PURPOSE**

Ongoing HMIS data quality monitoring will be conducted to the goal of ensuring agencies maintain a high level of data quality at all times with a minimal amount of data clean-up. Data quality issues that are the result of problems with a data entry process will be noticed more quickly with regular monitoring, which means corrections to processes can be implemented earlier to minimize the amount of corrections that will be necessary. Additionally, it can be easier to make corrections to more recent records where a client is still available and/or before a problem is compounded by information added at a later date.

#### **PROCESS**

Data is evaluated by the CoC HMIS Administrator to ensure agencies are completing records to the best of their ability, including updating records and, as additional client interactions take place, entering new information learned. HMIS data will be monitored regularly at the user, project, agency, and system levels to ensure that the above standards are met by all HMIS-participating agencies.

Any agency that does not meet the minimum data entry standards, missed submissions will be treated as not meeting standards, 3 or more times in a 12-month period can be contacted by PFH, who will work with them on a plan to improve and meet the standards moving forward.

Processes for monitoring each data quality standard is detailed below. Standards monitored monthly are due to the CoC HMIS Administrator by the 5<sup>th</sup> business day of each month. For standards monitored quarterly, the CoC HMIS Administrator will send reports and/or notification to a randomly selected subset of Atlanta CoC homeless projects on the following schedule:

Quarter	Data Under Review	Target Date for CoC HMIS Administrator to Send Report
Quarter 1	Jan - March Data	April - 5th Business Day
Quarter 2	April - June Data	July - 5th Business Day
Quarter 3	July - Sept Data	October - 5th Business Day
Quarter 4	Oct - Dec Data	January - 5th Business Day

A current copy of this Atlanta HMIS Data Quality Plan will be posted to the PFH website to ensure that HMIS-participating agencies are aware of the minimum data entry standards they are required to meet. PFH reserves the right to reduce monthly and/or quarterly monitoring for any project that consistently meets or exceeds data quality benchmarks.

#### **COMPLETENESS MONITORING**

#### **Universal Data Elements**

HMIS-participating agencies are to verify UDE data quality <u>for each project</u> to the CoC HMIS Administrator by the 5<sup>th</sup> business day of each month for the previous months data (i.e. Reports submitted by 5<sup>th</sup> business day in February will contain project data January 1<sup>st</sup> to January 31<sup>st</sup>) via form submission:

- Pull the following 2 reports
  - o HUD Data Quality Report (Link to 'How To Guide' <a href="https://icalliances.org/s/HUD-Data-Quality-Report-Handout-ClientTrack-LU-03262020.pdf">https://icalliances.org/s/HUD-Data-Quality-Report-Handout-ClientTrack-LU-03262020.pdf</a>)
  - Active Client List (Link to 'How To Guide' <a href="https://icalliances.org/s/Active-Client-List-Report-Guide-6052020.pdf">https://icalliances.org/s/Active-Client-List-Report-Guide-6052020.pdf</a>)
- Review reports, if data does not reflect project reality for the report period, correct data and repull reports prior to submission
- Open the submission form and, using data from the HUD Data Quality Report and Active Client List report,
   fill in the required fields
  - \*Please note the required fields may change from month-to-month. Make sure to enter the correct data\*
- Attach the full reports (HUD Data Quality Report and Active Client List) When reports are submitted, agencies are instructed to hide PII.
- Submit form

\*Form link will be posted to the PFH website.

	Data Collected For			When the Data is Collected						
Data Element	All Clients	HoH Only	HoH and Other Adults	Adult Clients Only	Record Creation	Project Start	At Occurrence	At Update	Annual Assessment	At Exit
3.01 Name	Х				X					
3.02 Social Security Number	Х				Х					
3.03 Date of Birth	Х				Х					
3.04 Race	Х				X					
3.05 Ethnicity	Х				X					
3.06 Gender	Х				X					
3.07 Veteran Status				Х	X					
3.08 Disabling Condition	X					Х				
3.10 Project Start Date	Х					X				
3.11 Project Exit Date	Х									Х
3.12 Destination	Х									Х
3.15 Relationship to Head of Household	Х					Х				

3.16 Client Location	Х			Х		Х	
3.20 Housing Move-in Date	Х				X**		
3.917 Living Situation		Х		Х			

- \* At time the client's location changes from one CoC to another, if applicable.
- \*\* At time of move-in to PH, if applicable.

#### **Project Specific Data Elements**

HMIS-participating agencies are to verify PSDEs data quality <u>for each project</u> to the CoC HMIS Administrator by the 5<sup>th</sup> business day of each month for the previous months data (i.e. Reports submitted by 5<sup>th</sup> business day in February will contain project data January 1<sup>st</sup> to January 31<sup>st</sup>) via form submission.

- Pull the following report
  - APR -CAPER Review (Link to 'How To Guide' <a href="https://icalliances.org/s/CSV-APR-Guide-LU-05202021.pdf">https://icalliances.org/s/CSV-APR-Guide-LU-05202021.pdf</a>)
- Review report, if data does not reflect project reality for the report period, correct data and repull reports prior to submission
- Open the submission form and, using data from the APR CAPER Review report, fill in the required fields
   \*Please note the required fields may change from month-to-month. Make sure to enter
   the correct data\*
- Attach the full reports
- Submit form

\*Form link will be posted to the PFH website

				Collection Po	oint	
		Project Start	Occurrence	Update	Annual Assessment	Project Exit
	4.02 Income and Sources	X		Χ	X	Χ
	4.03 Non-Cash Benefits	X		Х	X	Х
	4.04 Health Insurance	Х		Х	X	Х
	4.05 Physical Disability	Х		Х		Х
	4.06 Developmental Disability	Х		Х		Х
DE	4.07 Chronic Health Condition	Х		Х		Х
PS	4.08 HIV/AIDS	Х		Х		Х
nou	4.09 Mental Health Problem	Х		Х		Х
Common PSDE	4.10 Substance Abuse	Х		Х		Х
ပိ	4.11 Domestic Violence	Х		Х		
	4.12 Current Living Situation		Х			
	4.13 Date of Engagement		X			
	4.14 Bed-Night Date		Х			
	4.19 Coordinated Entry Assessment		Х			
	4.20 Coordinated Entry Event		Х			

<sup>\*</sup> The "Common Program Specific Data Elements", along with PSDEs required by each Federal Partner, can be found in the FY 2022 HUD Data Standards Manual

<u>An annual review</u> of PDDEs will be done on all projects in HMIS, including those not participating in HMIS as they are required to participate in the annual PIT/HIC, during the 4<sup>th</sup> quarter of each calendar year. This will also serve as preparation for the annual PIT/HIC done in the 1<sup>st</sup> quarter of each calendar year. The CoC HMIS Administrator will send a notification to the HMIS Agency Admin at each homeless service agency with submission link and due date.

The HMIS Agency Admin will:

- Run the Project and Grant Set-up report for each project
  - Review information for each project
- Submit form verifying accuracy or providing corrections of PDDEs for each project

<u>On a quarterly basis</u>, the CoC HMIS Administrator will run The One Data Quality Report (TODQ) to monitor PDDEs on a randomly selected subset of Atlanta CoC homeless projects. The CoC HMIS Administrator will send these reports and submission link to the agency HMIS Agency Admin.

Agencies with flagged PDDEs issues are asked to submit corrected PDDE information to the CoC HMIS Administrator within 30 days of receiving report from the CoC HMIS Administrator. This timeframe may be changed to accommodate individual situations upon approval by PFH.

For persistent data completeness issues, projects may be contacted by PFH to discuss the implementation of a Data Quality Improvement Plan (DQIP).

#### **TIMELINESS MONITORING**

As noted in the Monitoring section, on a quarterly basis, the CoC HMIS Administrator will run the HMIS Data Entry Timing Report to monitor Timeliness on a randomly selected subset of Atlanta CoC homeless projects. The CoC HMIS Administrator will send these reports and submission link to the agency of projects that were randomly selected.

Data timeliness cannot be edited, it can only be improved going forward.

Agencies with projects falling below data timeliness standards for that project type, more than 2 times in any 12-month period, will be referred by the CoC HMIS Administrator to PFH, who will contact the agency and work with them on a plan to improve and meet the standards moving forward.

For persistent data timeliness issues, projects may be contacted by PFH to discuss the implementation of a Data Quality Improvement Plan (DQIP).

HMIS Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in HMIS)
Coordinated Entry	Entry	Within 48 operating hours of a client contact/service
	Exit	Within 48 operating hours of a client contact/service
Homelessness	Entry	Within 48 operating hours of a client contact/service
Prevention	Exit	Within 48 operating hours of a client contact/service
Emergency Shelter –	Entry	Within 48 operating hours of a client contact/service
Utilizing only anentry/exit	Exit	Within 48 operating hours of a client contact/service

workflow		(Back date to date of last shelter night stay, the morning of the day the client did not return)
Emergency Shelter – Utilizing only an Night by Night workflow	Entry Exit	Within 48 operating hours of a client contact/service. Within 48 operating hours of a client contact/service (Back date to date of last shelter night stay, the morning of the day the client did not return)
Permanent Supportive Housing	Entry Exit	Within 48 operating hours of a client contact/service Within 48 operating hours of a client contact/service
Rapid Rehousing	Entry Exit	Within 48 operating hours of a client contact/service Within 48 operating hours of a client contact/service
Street Outreach	Contacts Exit (Formal Project Exit)	Within 48 operating hours of a client contact/service Live time or within 48 operating hours of project exit
	Auto-Exit (No-contact Exit)	After 90-days of no contact, project exit needs to be recorded within 48 operating hours (Back-dated to date of last contact)
Supportive Services	Entry	Within 48 operating hours of a client contact/service
Only (excludes Coordinated Entry)	Exit	Within 48 operating hours of a client contact/service
Transitional Housing	Entry Exit	Within 48 operating hours of a client contact/service Within 48 operating hours of a client contact/service

#### 5.5 ACCURACY MONITORING

<u>During annual monitoring</u>, PFH, in partnership with the CoC HMIS Administrator, will work with projects to review the data collected directly from clients, and the data entered into HMIS to ensure that the data entered into HMIS matches the client's reality. This may also occur at other points throughout the year.

For persistent data accuracy concerns, projects may be contacted by PFH to discuss the implementation of a Data Quality Improvement Plan (DQIP).

#### 5.6 **CONSISTENCY MONITORING**

On a quarterly basis, the CoC HMIS Administrator will run an HMIS User Management report listing users under each agency with HMIS access, both active and inactive. This report, and submission link, will be sent to the agencies HMIS Agency Admin. The HMIS Agency Admin is to inform the CoC HMIS Administrator within 30-days of receiving report:

- End users that should longer have access to HMIS under the agency
- Inactive end users that do need access to HMIS under the agency
  - These end users will need to complete re-training within 30-days to for their account to become active

#### 5.7 **SYSTEM-WIDE MONITORING**

**Bed Coverage & System Coverage** 

The CoC HMIS Administrator will review and update the CoCs' most recent Housing Inventory Chart (HIC) to know which projects participated in the most recent HIC but are not entering data into HMIS (excluding Victim Services Projects) on a quarterly or semi-annual basis.

Ensuring that a CoC's HMIS Coverage reaches, and stays at, 100% requires implementing a process to ensure new projects that become available to serve clients at-risk of or experiencing homelessness are communicated to the CoC and HMIS data entry is encouraged and/or required for the new project.

PFH will work the strategies below with the goal of increasing HMIS Bed and Response System coverage to 100%:

- The CoC ensures that all new projects that become available within the CoC that serve clients at-risk of, or experiencing homelessness, are encouraged, and/or required to enter data into HMIS.
- Provide a streamlined, simple process for new agencies and/or projects to communicate to the CoC about new projects operating within the community.
- Works with state and local funders to understand the importance of HMIS and encourage all funders to require the use of HMIS for grantees.

#### **Bed Utilization**

On a quarterly basis, the CoC HMIS Administrator will run The One Data Quality Report (TODQ) to monitor Bed Utilization on a randomly selected subset of Atlanta CoC homeless projects. The CoC HMIS Administrator will send these reports to the agency of projects that were randomly selected.

Agencies with projects utilization under 65% for ES and under 85% for RRH and PSH or over 105% will be contacted by the CoC HMIS Administrator for more information to verify that this utilization is accurate for the time period. If the utilization is not correct, the agency will have 30 days to correct the data, ensuring that all clients who were served in the time period are entered into the project (remedying under-utilization) and that all clients who were exited in the time period are exited from the project (remedying over-utilization).

This timeframe may be changed to accommodate individual situations upon approval by PFH. Summary reports for agencies with projects utilization under 65%/85% or over 105% will be sent to PFH.

For persistent bed utilization data issues, projects may be contacted by PFH to discuss the implementation of a Data Quality Improvement Plan (DQIP).

#### 6. DATA QUALITY IMPROVEMENT

PFH will work to ensure HMIS-participating agencies have access to all the support and tools they need to achieve a high level of data quality within HMIS. The following processes are designed to demonstrate to agencies the importance of data quality within HMIS and encourage its prioritization within their daily functions.

#### CONTINUOUS DATA QUALITY IMPROVEMENT PROCESS

Agencies with a project in HMIS identified with data quality improvement opportunities are permitted a minimum of 30-days to correct their data or processes. PFH may offer additional support and/or training to the participating agency until such a time as the agency effectively demonstrates an ability to meet with minimum data entry standards.

#### DATA QUALITY IMPROVEMENT PLAN

A Data Quality Improvement Plan (DQIP) is a detailed work plan intended to support and enhance an agency's data quality in a specific area.

A DQIP is a collaborative effort between the agency and PFH, with PFH providing support to the agency with appropriate resources and training to ensure the goals and objectives in the DQIP are successfully achieved.

#### Initiation

A DQIP may be advised by PFH when a monthly, quarterly, or annual monitoring shows one or more ongoing improvement opportunities related to data quality within a given agency (i.e., ongoing is defined as the improvement opportunity lasting longer than a specific period of time as defined by PFH without resolution).

#### **Evaluation**

Dependent upon DQIP evaluation results, the appropriate process from the options below will take place:

- 1. Agencies that meet required minimum standards will have their DQIP concluded by PFH and will return to the regular monitoring and oversight process.
- 2. Agencies that do not meet data quality standards by the end of their DQIP period, but have shown improvement, may have their DQIP extended to facilitate and ensure continued improvement.
- 3. Agencies that do not meet data quality standards by the end of their DQIP period and have not shown improvement or active engagement in their DQIP will be reported to the GAHMIS Lead for further review of the situation. PFH will engage the agency and GAHMIS Lead regarding next steps.

Agencies that continue to demonstrate a complete inability to meet minimum data quality standards and a lack of engagement may have their HMIS access suspended at the discretion of PFH and GA HMIS Lead to preserve the integrity of HMIS and ensure that other agencies do not suffer due to poor data quality from another agency. Suspension will be a last resort and will not occur without all other options being considered nor without extensive communication between PFH and GA HMIS Lead and the agency. The removal of this suspension will be up to GA HMIS's discretion.

#### **HMIS ANNUAL MONITORING TOOL**

The CoC HMIS Administrator will use a standard HMIS Annual Monitoring Tool to evaluate compliance of this Data Quality Plan, HMIS policies and procedures, agency agreements, user agreements, and any other documents governing the use of GAHMIS.

If data quality improvement opportunities are identified in any area during the evaluation PFH may decide that a Data Quality Improvement Plan will be created to assist the agency in addressing improvement opportunities using concrete, time-bound action steps.

#### **NEW PROJECT MONITORING**

New projects are monitored for data quality within 90 days of receiving access to HMIS. The CoC HMIS Administrator will run data quality reports to ensure data entry is running smoothly and to find any fundamental issues with project set-up or data entry processes that are negatively impacting data quality to address them quickly. New project Monitoring results will be addressed directly with the agency, project, or end user through a webinar, review training, or other defined step.

# APPENDIX

- A. Data Quality Improvement Plan
- B. HMIS Annual Monitoring Tool

# APPENDIX A: DATA QUALITY IMPROVEMENT PLAN

#### PERFORMANCE IMPROVEMENT PLAN



Agency: NAME

Contracted Services/Program: SERVICE/PROGRAM TYPE Monthly Reporting Period: MONTH, YEAR- MONTH, YEAR

The purpose of this plan is to improve outcomes for individuals and families served, strengthen the delivery of effective services, support partnerships throughout the CoC, and to establish ongoing self-monitoring and continuous improvement.

Performance Measures	Standard	(MM/YY)	(MM/YY)	(MM/YY)	(MM/YY)
Goal 1:					
Goal 2:					
Goal 3:					
Goal 4:					

Goals and Activities	Anticipated Outcomes and Timeframe
<b>Communication Plan:</b> Please share effective initiatives, attainment each month.	program highlights, and challenges around goal
Goal:	
Strategies/Activities:	
Goal:	
Strategies/Activities:	
Goal:	
Strategies/Activities:	

Goal:	
Strategies/Activities:	
Evaluation Plan:	
Acknowledgement and Acceptance of Data Quality Impro	ovement Plan
Program Manager/Agency Executive Director	Date
PFH Manager/Director	Date

# APPENDIX B: HMIS ANNUAL MONITORING TOOL

	Annual HMIS and Data Quality Monitoring Checklist Timeframe Monitored (Start-to-End Dates):		
✓	Monthly Monitoring Standards – If answer is no, add comment	Yes	No
	Project has submitted UDE report on time each month?		
	Project is meeting completeness standards for UDEs each month?		
	Project has submitted PSDE report on time each month?		
	Project has met PSDE benchmarks each month?		
✓	Random Quarterly Monitoring Standards – If answer is no, add comment	Yes	No
	PDDEs - Has project has a random quarterly monitoring for PDDEs?  If yes, list quarter(s) monitored:		
	Are the projects PDDEs current and accurate per the Data Quality Plan standard?		
	Has the project notified the CoC HMIS Administrator of changes as required per the Data Quality Plan standard?		
	<b>Timeliness</b> - Has project has a random quarterly monitoring for timeliness?  If yes, list quarter(s) monitored:		
	Are entries and contacts being recorded per the Data Quality Plan standard?		
	Are exits being recorded per the Data Quality Plan standard?		
	Street Outreach Only: Are contacts are being recorded per the Data Quality Plan standard?		
	Street Outreach Only: Are no-contact exits being recorded per the Data Quality Plan standard?		
	Accuracy - Has project has a random quarterly monitoring for accuracy?  If yes, list quarter(s) monitored:		
	Are accuracy measures being updated/addressed per the Data Quality Plan standard?		
	Consistency - Has project has a random quarterly monitoring for consistency?  If yes, list quarter(s) monitored:		
	Are consistency measures being updated/addressed per the Data Quality Plan standard?		
	<b>Bed Utilization</b> - Has project has a random quarterly monitoring for bed utilization? If yes, list quarter(s) monitored:		
	Does the project utilization fall within the standards per the Data Quality Plan?		
✓	Annual Monitoring Standards – If answer is no, add comment	Yes	No
	PDDEs – Did the project respond to the annual PDDE monitoring per the Data Quality Plan standard?		
	PDDEs – Is the projects:		
	- Organization information accurate?		
	- Project information accurate?		
	- CoC information accurate?		
	- Funding source information accurate?		
	- Bed and unit inventory accurate?		
	<b>Accuracy</b> – Did the project respond to the annual accuracy monitoring per the Data Quality Plan standard?		
	Accuracy – Are accuracy measures being updated/addressed per the Data Quality Plan standard?		

Privacy Procedural	Yes	No
The Consumer Notice is displayed in a public location and is explained to clients upon intake, and extracopies of the HMIS Consumer Notice, Privacy Policy, HMIS Policies and Procedures, and Agency Privacy and Security Policies and Procedures are available for clients.		
- Clients are provided an opportunity to ask questions about the Consumer Notice.		
- All HMIS data in hard-copy and all signed forms are stored in a secure location (protected from public/ unauthorized access).		
Workstations are located in a non-public location OR monitored to prevent public/unauthorized access and screens face away from public view.		
- HMIS user credentials (Passwords and Usernames) are not being shared between users, and not written down in plain view or saved within browser (login-required password managers are allowed).		
Data Security	Yes	No
A secure internet connection is used to access the HMIS.		
A firewall is installed, active, and automatically updating (or updated regularly) on each workstation computer OR on the network.		
All workstation computers have updated operating systems.		
Automatically updating antivirus software is Installed and active on all workstation computers.		
All workstation computers use an updated browser to access the HMIS (that is NOT Internet Explorer).		
All workstations have an automatic, password-protected screensaver that activates after 5minutes (or less) of inactivity.		
** Unauthorized access to devices is restricted by turning off File Sharing and Network Discovery (recommendation only; not required).		
[ \		
If devices are used in the field they are encrypted upon lock-out		
	□	□ No
If devices are used in the field they are encrypted upon lock-out		_
If devices are used in the field they are encrypted upon lock-out  Compliance  The agency has a Client Grievance Policy and Procedure allowing clients to submit comments	Yes	No
If devices are used in the field they are encrypted upon lock-out  Compliance  The agency has a Client Grievance Policy and Procedure allowing clients to submit comments regarding HMIS data privacy and security.  The agency ensures the HMIS is only accessed and used by persons with current, signed User	Yes	No 🗆
If devices are used in the field they are encrypted upon lock-out  Compliance  The agency has a Client Grievance Policy and Procedure allowing clients to submit comments regarding HMIS data privacy and security.  The agency ensures the HMIS is only accessed and used by persons with current, signed User Agreements with their own personal HMIS license.  The agency has a current, executed HMIS Participation Agreement on file with CoC HMIS Administrator and, if applicable, a signed or executed Inter-Agency Data Sharing and Coordinated	Yes	No
If devices are used in the field they are encrypted upon lock-out  Compliance  The agency has a Client Grievance Policy and Procedure allowing clients to submit comments regarding HMIS data privacy and security.  The agency ensures the HMIS is only accessed and used by persons with current, signed User Agreements with their own personal HMIS license.  The agency has a current, executed HMIS Participation Agreement on file with CoC HMIS Administrator and, if applicable, a signed or executed Inter-Agency Data Sharing and Coordinated Services Agreement  The agency follows Security and Privacy Policies and Procedures for HMIS data that are compliant with HMIS requirements (e.g., addressing management, handling, storage, communication, and disposal of hard-copy and/or electronic Personally Identifiable Information(PII)/Personal Protected	Yes	No
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✓	Additional Monitoring Standards – If answer is no, add comment	Yes	No
	<b>DQIP</b> - Has the project had a DQIP implemented in the past 12 months?		
	- If yes, and DQIP is current, is agency responsible for project cooperating with the DQIP?		
	- If yes, and the DQIP has ended, is the project now in compliance per the Data Quality Plan standards?		
	<b>New Projects Only</b> – If this was/is a new project, per the Data Quality Plan standard, were there any data quality issues noted within the 90-day monitoring period?		
	- If yes, did the project adequately resolve them?		
Com	nments:		

Completed By:	Date:
Agency Executive Director:	Date: