



SACRAMENTO HOMELESS MANAGEMENT
INFORMATION SYSTEM: DATA QUALITY PLAN

Adopted November 2020

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Introduction

This document describes the Homeless Management Information System (HMIS) Data Quality Plan for the Sacramento Continuum of Care (CoC). The Plan includes data quality standards and protocols for ongoing data quality monitoring that meets requirements set forth by the US Department of Housing and Urban Development (HUD). It has been developed by HMIS Lead Agency Sacramento Steps Forward, in coordination with the CoC Advisory Board's HMIS & Data Committee, for approval by the Advisory Board. This Data Quality Plan will be updated annually, considering the latest HMIS Data Standards and locally developed performance plans.

The HMIS is Sacramento's electronic data collection system that maintains client-level data about the individuals and families who receive homeless and other human services throughout the community. The HMIS also assists agencies with project administration, operations, and reporting. Some of the typical benefits of an HMIS include:

- Improved service delivery and prompt referrals for clients
- Immediate access to important client information
- Quick and easy preparation of reports for funders, stakeholders
- Access to CoC-level performance data to inform system improvements

HUD requires that all CoCs receiving HUD grants utilize HMIS or similar database. The County of Sacramento also requires that all projects receiving CalWORKS and other County funding must report client-level data in HMIS. All VA-funded Grant Per Diem and Supportive Services for Veteran Families (SSVF) projects must also report client-level data in HMIS. The only current exceptions to these funders' requirements are projects and agencies specifically serving victims of domestic violence.

What is a Data Quality Plan?

A data quality plan is a community-level document that enhances the ability of the CoC to achieve statistically valid and reliable data. A data quality plan sets expectations for the CoC, the HMIS Lead Agency, and the end users to capture valid and reliable data on persons accessing the homeless assistance system.

Developed by the HMIS Lead Agency and formally adopted by the CoC, the plan:

- Identifies the responsibilities of all parties within the CoC with respect to data quality;
- Establishes specific data quality benchmarks for timeliness, completeness, accuracy, and consistency;
- Describes the procedures for implementing the plan and monitoring progress toward meeting data quality benchmarks; and
- Establishes timelines for monitoring data quality on a regular basis.

HMIS Data Standards

In May of 2014, HUD published the revised and final HMIS Data Standards. The May 2014 Data Standards replaced the March 2010 HMIS Data Standards by which client and project-level data reporting have been guided. The HMIS Data Standards identify Universal Data Elements, Program Specific Data Elements, and Project Descriptor Data Elements which are required of all homeless projects participating in the HMIS. Frequency of data collection and subsequent entry into the HMIS are also required. Periodically, HUD revises the HMIS Data Standards and releases a new version. The latest version, 2020 HMIS Data Standards, was released in October 2019.

Universal Data Elements

The Universal Data Elements establish the baseline data collection requirements for all homeless housing and/or service providers entering data into the HMIS. They are the basis for producing unduplicated estimates of the number of homeless people accessing services from homeless assistance providers, basic demographic characteristics of people who are homeless, and patterns of service use, including information on shelter stays and homelessness episodes over time.

The required Universal Data Elements include the following:

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

Program Specific Data Elements

Program-Specific Data elements provide information about the characteristics of clients, the services that are provided, and client outcomes. Many of these data elements represent transactions or information that may change over time. Most Program Specific Data Elements shall be captured at project entry and exit, and a few must be captured at project entry, exit, and on an annual basis.

The required Program Specific Data Elements include the following:

| | | | |
|------|--------------------------|-------------------|--------------------------|
| | 4.11 | Domestic Violence | |
| 4.02 | Income and Sources | 4.12 | Current Living Situation |
| 4.03 | Non-Cash Benefits | 4.13 | Date of Engagement |
| 4.04 | Health Insurance | 4.14 | Bed-Night Date |
| 4.05 | Physical Disability | | |
| 4.06 | Developmental Disability | | |

- 4.07 Chronic Health Condition
- 4.08 HIV/AIDS
- 4.09 Mental Health Problem
- 4.10 Substance Abuse
- 4.20 Coordinated Entry Event
- 4.19 Coordinated Entry Assessment

Project Descriptor Data Elements

Project Descriptor Data Elements (PDDEs) contain basic information about projects participating in a CoC’s HMIS and help ensure the HMIS is the central repository of information about homelessness. The PDDE’s are the building blocks of the HMIS. They enable the HMIS to:

1. Associate client-level records with the various projects that client will enroll in across CoC projects;
2. Clearly define the type of project the client is associated with the entire time they received housing or services;
3. Identify which federal partner programs are providing funding to the project; and
4. Track bed and unit inventory and other information, by project, which is relevant for the Longitudinal Systems Analysis (LSA), System Performance Measures (Sys PMs), Housing Inventory Count (HIC), Point In Time (PIT) Count, and bed utilization reporting.

Project descriptor data are generally entered and managed by the HMIS Lead Agency, not a project end user. They are created at initial project setup within the HMIS and shall be reviewed at least once annually and updated as needed.

The required Project Descriptor Data Elements include the following:

- 2.01 Organization Information
- 2.1 2.02 Project Information
- 2.2 2.03 Continuum of Care Code
- 2.3 2.06 Funding Sources
- 2.4 2.07 Bed and Unit Inventory Information
- 2.5

Benchmarks and Goals

Timeliness

Timeliness answers the question: “Is the necessary client information entered into HMIS within a reasonable period of time?”

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. Timely data entry also ensures that the data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Live Data Entry is highly recommended. To

monitor the timeliness of data entry for entry into a project and exit from a project run the HMIS Data Quality Report under HUD Based Reports.

Each type of project has different expectations on timely data entry. Timeliness is measured by comparing the enrollment entry/exit date to the assessment entry/exit created date. Timeliness cannot be edited, only improved going forward – but assessment information dates should match the date the client interview occurred.

Data Entry Timeline by Project Type

All data shall be entered into the HMIS in a timely manner and Sacramento CoC's goal is to enter 100% of data per the following data entry timelines. As the COC recognizes entering 100% of all data may not be possible in all cases, a benchmark of 95% of all clients being entered in the following time frames has been established.

- **Emergency Shelter projects for Singles:** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.
- **Emergency Shelter projects for Families:** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.
- **Transitional Housing and Permanent Housing projects:** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.
- **Permanent Supportive Housing (PSH):** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.
- **Prevention and Rapid Re-Housing projects:** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.
- **Supportive Service Only projects (SSO):** All Universal Data Elements and Project Specific Data Elements must be entered within **three (3) days** of intake and/or exit.

Program Descriptor Data Elements for all program types (Emergency Shelter, Transitional Housing, Permanent Housing, Prevention and Rapid Re-Housing, and Supportive Service Only programs) shall be entered concurrently with setup of the program in the Sacramento HMIS.

Completeness

Completeness answers the question: “Are all of the clients we serve being entered into HMIS? Are all of the necessary data elements being recorded into HMIS?”

Complete data is the key to assisting clients in finding the right services and benefits to end their homelessness. Incomplete data may hinder an organization's ability to provide comprehensive care to the clients it serves. Incomplete data can also negatively impact both the Sacramento Continuum of Care and Sacramento Steps Forward's ability to make generalizations of the population it serves, track patterns in client information and changes within the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG, and low HMIS data quality scores may impact renewal funding as well as future funding requests.

Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, including:

- Unduplicated counts of persons served;
- Patterns of use of persons entering and exiting the homeless assistance system in the community; and
- Evaluation of the effectiveness of the community’s homeless assistance system.

Completeness – Universal and Program Specific Data Elements

Sacramento CoC’s goal is to collect 100% of all data elements (**Universal and Program Specific**). Though the CoC recognizes that collecting 100% of all data elements may not be possible in all cases, this goal is set in order to guarantee that the CoC continues to meet HUD-funding compliance requirements and to further ensure participation by the CoC in the Longitudinal Systems Analysis (LSA). Therefore, the Sacramento CoC’s HMIS & Data Committee with the CoC Board’s approval, has established Data Quality Thresholds (see Table 1, Appendix A). The Data Quality Thresholds set an acceptable range of “Missing/Data Not Collected”, and “Client Doesn’t Know/Client Refused” responses, depending on the data element. To determine compliance, percentages will be rounded (example: .04% becomes 0%).

HUD/Sacramento CoC expects that all clients receiving housing and/or services through the homeless assistance system will have their service delivery documented in the HMIS. If a project only enters data on a few of its clients, the project’s efficiency cannot accurately be determined. Incomplete data may erroneously reflect low bed utilization rates (for housing projects), and may inaccurately reflect clients’ progress in meeting programmatic goals (i.e. employment, transitioning to permanent housing). All projects using the HMIS shall enter data on one hundred percent (100%) of the clients they serve. Due to a lack of historical data, these standards will be reviewed and revised annually to make sure the thresholds are reasonable.

Completeness – Project Descriptor Data Elements

Pursuant to HUD’s HMIS Data Standards, all Project Descriptor Data Elements must be entered for all projects participating in the HMIS. In order to ensure that the CoC meets HUD-funding compliance requirements, the following acceptable response rate ranges have been established:

| Project Descriptor Data Elements | TARGET % | ACCEPTABLE NULL/MISSING % |
|---|-----------------|----------------------------------|
| 2.01 Organization Information | 100% | 0% |
| 2.02 Project Information | 100% | 0% |
| 2.03 Continuum of Care Code | 100% | 0% |
| 2.06 Funding Sources | 100% | 0% |
| 2.07 Bed and Unit Inventory Information | 100% | 0% |

Bed/Unit Utilization Rates

One of the primary features of the HMIS is its ability to record the number of client stays (bed nights) at a homeless residential facility. A project’s bed/unit utilization rate is the number of beds/unit occupied as a percentage of the entire bed inventory. When a client is admitted into a residential project (emergency, transitional, or permanent), s/he is assigned a housing service. This housing service is named as “Housed with-----name of the project or funding source”. The client remains in this service until s/he is discharged

from the project. When the client is discharged from the project, s/he is also discharged from this housing service in the HMIS.

Acceptable range of bed/unit utilization rates for established projects (as per LSA Guidelines):

- Emergency Shelters: 65%-105%
- Transitional Housing: 65%-105%
- Permanent Supportive Housing: 65%-105%

A project's bed utilization rate is an excellent barometer of data quality. A low utilization rate could reflect low occupancy, but it could also indicate that data is not being entered in the Sacramento HMIS for every client served. A high utilization rate could reflect that the project is over capacity, but it could also indicate that clients have not been properly discharged from the project in the Sacramento HMIS.

Housing Inventory

The CoC Lead Agency will request housing inventory from each residential facility in the homeless assistance system at least annually. The homeless assistance provider operating the residential facility will provide its housing inventory when requested or when housing inventory has changed to the CoC Lead Agency in timely manner to ensure updates in HMIS.

The CoC recognizes that new projects may require time to reach the projected occupancy numbers and will not expect them to meet the utilization rate requirement during the **first six months** of operating.

Accuracy

Accuracy answers the question: "Does HMIS data accurately reflect true client information? Are the necessary data elements being recorded in HMIS in a consistent manner?"

Information entered into the HMIS needs to be valid, i.e. it needs to accurately represent information on the people that enter any of the homeless service projects contributing data to the HMIS. The best way to measure accuracy of client data is to compare the HMIS information with more accurate sources, such as a social security card, birth certificate, or driver's license. To ensure the most up-to-date and complete data, data entry errors should be corrected on a monthly basis.

As a general rule, it is a better practice to select "client doesn't know/refused" than to misrepresent the population.

Data consistency will ensure that data is understood, collected, and entered consistently across all projects in the HMIS. Consistency directly affects the accuracy of data; if an end user collects all of the data, but they don't collect it in a consistent manner, then the data may not be accurate. All data in HMIS shall be collected and entered in a common and consistent manner across all projects. To that end, all intake and data entry workers will complete an initial training before accessing the live HMIS system, and access additional training opportunities offered by the HMIS Administrator.

All Universal Data Elements and Program Specific Data Elements must be obtained from each adult and unaccompanied youth who apply for services through the homeless assistance system. Most Universal Data Elements are also required for children age 17 years and under.

Most Universal Data Elements and Program Specific Data Elements include a 'Client doesn't know' or 'Client refused' response category. These are considered valid responses if the client does not know or the client refuses to respond to the question. 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 shall not be used to indicate that the case manager or data entry person does not know the client's response. The HMIS Data Standards assume that fields for which data are not collected will be left blank (i.e. 'missing'). Since Sacramento's HMIS system requires a response to all data fields before saving a record, the HMIS User must use a specific response category "Data not collected". In such cases, "Data not collected" response category is treated as missing data for reporting purposes.

Data Consistency Checks The HMIS staff will check data accuracy and consistency by running reports that check for entry errors such as duplicate files created, overlapping enrollments, or inconsistent responses. Examples of these checks will include:

1. Verification that new client profiles do not duplicate existing profiles
2. Verification that information describing a client's experience in homelessness conforms with other components of the clients record (e.g. a client's approximate date of start of homelessness cannot be AFTER a program enrollment)
3. Verification the referrals and referral responses are correctly entered.
4. Verification that housing start dates are entered correctly.

Data Quality Monitoring Plan

The purpose of monitoring is to ensure that the agreed-upon data quality targets are met to the greatest extent possible, and that data quality issues are quickly identified and resolved. The CoC recognizes that the data produced from the HMIS is critical to meet the reporting and compliance requirements of HUD, the individual agencies, and the CoC as a whole.

The HMIS administer will post quarterly dashboards reporting program-level performance concerning meeting data quality goals. The reports will include the standards laid out in the Data Quality Plan and will also include other data quality issues as determined by the HMIS Administrator. These public reports will not identify specific programs, but agencies will be able to identify their own data.

Roles and Responsibilities

HMIS Administrator

The HMIS Administrator is responsible for building reports and making them available to the CoC. This includes the data quality reports necessary for data correction. The HMIS staff will be responsible for the

ongoing maintenance of existing reports as well, which includes changes in reports as updates are made to the system.

The HMIS team at Sacramento Steps Forward is also responsible for providing the necessary training for the CoC. Currently, the HMIS team offers the following trainings: New User training, Management Training, Report training, HMIS Security Training, Refresher Training (groups or one-on-one sessions). In addition, HMIS staff is available to provide technical assistance to users that need help correcting data entry errors.

On a quarterly basis, the HMIS staff will provide to the HMIS committee data quality reports for agencies funded by the CoC and offer additional training to those agencies that need to improve their data quality. The quarterly reports for the HMIS committee will provide information on timeliness, bed utilization rates, and data completeness for CoC-funded projects.

HMIS & Data Committee

The HMIS & Data Committee is responsible for reviewing data quality reports semi-annually (or quarterly as determined by CoC’s need) and working with HMIS staff and providers to correct data that does not comply with community-wide standards as established in the Data Quality Plan. The HMIS & Data Committee will maintain an ongoing relationship with the HMIS Administrator to identify training needs for the continuum based on monthly data quality reports.

Data Review Timeline

Monitoring and data quality reviews will be conducted semi-annually by the HMIS & Data Committee, in an annual cycle as follows:

| QUARTER | DATA UNDER REVIEW | TARGET REVIEW DATE |
|-----------|--------------------|--|
| Quarter 1 | Months 1 - 3 Data | 25th of the 4th Month |
| Quarter 2 | Month 4 - 6 Data | 25th of the 7th Month |
| Quarter 3 | Month 7 - 9 Data | 25th of the 10th Month |
| Quarter 4 | Month 10 - 12 Data | 25th of the 1st Month (New Cycle) |

Additional monitoring, data quality and utilization rates reviews will be conducted in preparation for submission of LSA data to HUD, in accordance with the following schedule:

| LSA REVIEW MONTH | TARGET REVIEW DATE |
|------------------|---------------------------------|
| October | October 31st |
| November | November 30th |
| December | December 31st |
| January | January 31st |
| February | February 10th |

Target

When data quality benchmarks are met, reporting will be more reliable and can be used to evaluate service delivery, project design and effectiveness, and efficiency of the system. All HMIS partner agencies are expected to meet the data quality benchmarks described in this document. To achieve this, HMIS data will be monitored and reviewed in accordance with the schedule outlined in this section. All monitoring will be conducted by the Sacramento HMIS Lead Agency with the full support of the CoC.

Incentives and Enforcement

To ensure that HMIS partner agencies meet the minimum data entry standards set forth herein, a copy of this Data Quality Plan will be posted to the HMIS Lead’s website. Sample intake, annual Status Assessment, and exit forms are posted on HMIS Lead’s website. The HMIS Lead will provide training to HMIS partner agencies to run and interpret the HMIS Data Quality report in accordance with the monitoring schedule described in the “Monitoring” section to facilitate compliance with the minimum data entry standards.

Agencies that meet the data quality benchmarks will be periodically recognized by the CoC. HMIS partner agencies that do not adhere to the minimum data entry standards set forth herein will be notified of their errors and provided with specific information regarding the nature of the inaccuracies and methods by which to correct them. The HMIS partner agencies will be given one month to correct any identified data quality issues. Training will be offered to agencies that remain noncompliant with the minimum data entry standards. HMIS partner agencies continuing in default may have access to the HMIS suspended until such time as agencies demonstrate that compliance with minimum data entry standards can be reached.

Table 1, Appendix A

Universal and Program Specific Data Element Quality Thresholds

| UNIVERSAL DATA ELEMENT | TARGET % | TH, PSH, HUD SSO, RRH, HP | | ES, Non-HUD SSO | | Outreach | |
|-----------------------------|----------|-----------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|
| | | Missing/ Data Not Collected | Client Doesn’t Know/ Refused | Missing/ Data Not Collected | Client Doesn’t Know/ Refused | Missing/ Data Not Collected | Client Doesn’t Know/ Refused |
| 3.01 Name | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.02 Social Security Number | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.03 Date of Birth | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.04 Race | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.05 Ethnicity | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.06 Gender | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.07 Veteran Status | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.08 Disabling Condition | 100% | 0% | 0% | 0% | 5% | 0% | 5% |
| 3.10 Project Entry Date | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.11 Project Exit Date | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.12 Destination | 100% | 5% | 5% | 5% | 5% | 15% | 5% |

| | | | | | | | |
|--|------|----|----|----|----|----|----|
| 3.15 Relationship to Head of Household | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.16 Client Location | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.20 Housing Move-In Date | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 3.917 Prior Living Situation | 100% | 0% | 0% | 0% | 0% | 0% | 0% |

| PROGRAM SPECIFIC DATA ELEMENT | TARGET % | TH, PSH, HUD SSO, RRH, HP | | ES, Non-HUD SSO | | Outreach | |
|-------------------------------|----------|-----------------------------------|---|-----------------------------------|---|-----------------------------------|---|
| | | Missing/ Data Not Collected | Client Doesn't Know /Refused | Missing/ Data Not Collected | Client Doesn't Know /Refused | Missing/ Data Not Collected | Client Doesn't Know /Refused |
| 4.02 Income and Sources | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.03 Non-Cash Benefits | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.04 Health Insurance | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.05 Physical Disability | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.06 Developmental Disability | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.07 Chronic Health Condition | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.08 HIV/AIDS | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.09 Mental Health Problem | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.10 Substance Abuse | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.11 Domestic Violence | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| 4.12 Current Living Situation | 100% | | | | | 0% | 0% |
| 4.13 Date of Engagement | 100% | | | | | | |
| 4.14 Bed-Night Date | 100% | | | | | | |