# HMIS
# DATA QUALITY
# PLAN

**Sacramento County**

**Continuum of Care (CoC)**

## DATA QUALITY

The HMIS Data Quality Plan ensures that HMIS data and reports are reliable, accurate, and complete. Ongoing data quality monitoring meets the requirements set forth by the Sacramento CoC.

# HMIS Data Quality Plan

*Adopted by the Sacramento County Continuum of Care (06-2024)*

## Contents

## 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. All VA-funded Grant Per Diem and Supportive Services for Veteran Families (SSVF) projects must also report client-level data in HMIS. The City of Sacramento and/or County of Sacramento may also requires projects receiving its funding must 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 commitment and 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.

**Sacramento Community Standards**

The Sacramento Community Standards *serve as a basis for ensuring all publicly funded programs for people who are at-risk of or experiencing homelessness are offered in a consistent manner, in line with federal, state and local funding requirements, and evidence-based approaches to providing equitable, effective, and efficient assistance*. The Sacramento CoC and local funders use HMIS data to set performance goals or targets identified in the Sacramento Community Standards document for each applicable program.

## HMIS Data Standards

HMIS Data Standards are based on the HUD 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.

## 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 | 3.15 | Relationship to Head of Household |
| 3.05 | Ethnicity | 3.16 | Client Location |
| 3.06 | Gender | 3.17 | Length of Time on Street, in an ES or Safe Haven |
| 3.07 | Veteran Status | 3.20 | Housing Move-in Date |
| 3.08 | Disabling Condition | 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:

| | | | |
|---|---|---|---|
| 4.02 | Income and Sources | 4.10 | Substance Use Disorder |
| 4.03 | Non-Cash Benefits | 4.11 | Domestic Violence |
| 4.04 | Health Insurance | 4.12 | Current Living Situation |
| 4.05 | Physical Disability | 4.13 | Date of Engagement |
| 4.06 | Developmental Disability | 4.14 | Bed-Night Date |
| 4.07 | Chronic Health Condition | 4.19 | Housing Assessment at Exit |
| 4.08 | HIV/AIDS | 4.20 | Coordinated Entry Even |
| 4.09 | Mental Health Problem | 4.17 | Residential Move-In Date |

## 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 Annual Homeless Assessment Report (AHAR), System Performance Measures (SPM), Housing Inventory Counts (HIC), Point In Time (PIT) counts, and bed utilization reporting.

Project descriptor data are generally entered and managed by the HMIS Lead Agency, not the 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
2.02  Project Information
2.03  Continuum of Care Information
2.06  Funding Sources
2.08  Bed and Unit Inventory

## 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. There are timeliness type of reports in HMIS that agencies can use under "Agency Management" reports to monitor the timeliness of data entry for entry into a project and exit from a project.

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 **48 hours** of intake and/or exit.

- ▶ **Emergency Shelter projects for Families:** All Universal Data Elements and Project Specific Data Elements must be entered within **48 hours** 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.

- ▶ **Street Outreach projects:** All Universal Data Elements and Project Specific Data Elements must be entered within **48 hours** of intake and/or exit.

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

## Auto-Exit Procedures

The auto-exit feature is enabled for programs in HMIS. **What does this mean?** HMIS will automatically record a program exit and program exit date for enrollments under the conditions of inactivity for a specific time frame within the clients' program enrollment. The system automatically records a program exit when the clients have had no program-related activity (e.g. program-level services, program-level assessments, program-level program statuses, and currently living situation (CLS) assessments). Unless otherwise specified the system will populate all fields in the exit screen as "Data not collected" and the exit destination with a response of "No exit interview completed."

When there is inactivity in the past **90 days** for the program types below, the auto-exit will activate:
- Coordinated Entry (CE)
- Emergency Shelter (ES)

- Homelessness Prevention (HP)
- Rapid Re-Housing (RRH) *

  (*Note: RRH program type falls under this time frame to best align with other reporting tools such as the By-Name List (BNL) which captures client activity to sufficiently demonstrate they are experiencing homeless and housing placement outflow.)
- Steet Outreach
- Supportive Services Only (SSO)
- Transitional Housing (TH)

When there is inactivity in the past **180 days** for the program types below, the auto-exit will activate:
- Permanent Housing (PH)
- Permanent Supportive Housing (PSH)

If more than one household member is included in an enrollment, HMIS will look at all household members' program activity before recording an exit.
- If at least one household member has a program-level service or program-level assessment during the 90 days, the system won't activate an exit for any group members.

- If there are no program-level services or program-level assessments during the 90 days, the system will automatically record an exit for all household members included in the enrollment.

  o The program exit date will be based on the date of the last program-level service or program-level assessment of any household member and will be the same for all household members. The system will record this matching exit date for all household members, regardless of whether the household member was included in the program-level service or assessment and regardless of whether all household members have the same program entry date.

Regardless of any other client activity, only program-level services and program-level assessments will keep a client's and their household members' program enrollment active in HMIS. Inactivity will negatively impact the client's space on certain housing lists and records of the client's length of homelessness (chronicity). To avoid this, enter services at least once a month to keep your client program enrollment active in HMIS as this shows the work you are doing for other community agencies.

## **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 informed estimates 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 Notice of Funding Opportunity. Unreliable HMIS data quality 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.

## Auto Service Placement

The system automatically provides a "Case Management" service when a client is initially enrolled in a program.  It is critical to document Case Management: General Case Management services whenever you contact, search for, or otherwise do work for a client as this maintains their activity in HMIS and documents your work.

## 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 Annual Homeless Assessment Report (AHAR).  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 Information | 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), they are assigned a housing service. This housing service is named as "House with name of the project or funding source". The client remains in this service until they are discharged from the project. When the client is discharged from the project, they are also discharged from this housing service in the HMIS.

Acceptable range of bed/unit utilization rates for established projects (as per AHAR 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 aged 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.
5. Verification that active clients have services recorded on a regular basis.
6. Verification that inactive clients are accurately exited from programs.

## 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 may identify specific programs, and 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.

The HMIS staff will provide to the HMIS committee data quality reports for agencies in the CoC and offer additional training to those agencies that need to improve their data quality. The reports for the HMIS committee will provide information on timeliness, bed utilization rates, and data completeness.

## HMIS & Data Committee

The HMIS & Data Committee is responsible for reviewing data quality reports and work 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 quarterly by the HMIS & Data Committee, in an annual cycle as follows:

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

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

| REPORTING | REVIEW MONTH | TARGET REVIEW START DATE |
|-----------|--------------|--------------------------|
| Longitudinal System Analysis (LSA) | November - December | November 1st |
| System Performance Measures (SPM) | January | January 1st |
| Housing Inventory Count (HIC) & Point-in-Time (PIT) | January - April | February 1st |

## 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 in accordance with the HMIS Data Quality Monitoring Tool (design in process), and 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 data quality reports to HMIS partner agencies 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 | | | | | | | |
| 3.11 Project Exit Date | | | | | | | |
| 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 Mov-in Date | | | | | | | |
| 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 Disorder | 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% | | | 0% | 0% |
| 4.13 Date of Engagement | 100% | 0% | 0% | 5% | 5% | 5% | 5% |
| 4.14 Bed-Night | | | | | | | |
| 4.19 Coordinated Entry Assessment | | | | | | | |
| 4.20 Coordinated Entry Event | | | | | | | |

## Document History

| Date of Revision | Document Version | Significant Revisions Include |
|---|---|---|
| 11/14/2018 | 1.0 | First release of the Data Quality Plan |
| 5/10/2023 | 1.1 | Inclusion of auto-exit procedures, auto-service placement, and listed HUD-mandated reporting schedule |