Introduction to Data Quality

Data quality in the Homeless Management Information System (HMIS) is crucial for accurately representing the reality of homelessness and program and system performance. To achieve good data quality, data must be assessed using a client centered approach, all tools must align with HMIS Data Standards and our local Data Quality Plan, and all data entry is to be completed in a timely fashion using a HMIS Staff approved workflow.

The Data Quality Plan applies to all HMIS partners regardless of project type or funding source as described in the table below. HMIS Users should regularly review the HMIS Data Standards Manual and related program manuals ¹ for further guidance. Victim Service Providers (VSP) shall maintain a comparable database that meets all minimum Federal and local data collection and reporting requirements, where all project data for any VSP will be maintained in the CoC HMIS.

Data Coverage

The concept of data coverage refers to the sample size and diversity of the agencies and programs who utilize the HMIS. If we want an accurate picture of our community, we must not overlook any agency or program providing services within the Continuum of Care. It is important to note that this includes HUD funded and non-HUD funded programs and agencies.

Bed Coverage Rate

DuPage Continuum of Care has set a threshold of 100% bed coverage rates for dedicated homeless lodging providers in HMIS. VSP point-in-time data will be submitted to HMIS annually, or more frequently as needed, from their HMIS comparable database.

The Bed Coverage Rate is calculated by project type,

= (# dedicated homeless beds in HMIS) divided by (# dedicated homeless beds in DuPage CoC)

Other

The Data & Performance Committee, along with the partnership of DuPage Continuum of Care's Leadership and related committees, will continue to assess community data needs, including the inclusion of new agencies and data elements.

Data Quality

Data Quality is broken down into 5 equally important components: Completeness, Timeliness, Accuracy, Training and Consistency. Each of these components must be individually monitored by those completing the data entry, Agency Data Administrators, and System Administrators.

Completeness

HMIS and Agency Data Administrators are to ensure that the Project Descriptor Data Elements are

¹ https://www.hudexchange.info/programs/hmis/hmis-guides/#project-setup-and-data-collection-resources

complete for all HMIS projects² and that the data is reviewed annually for each project.

Each participating agency, project, Agency Data Administrator, and user entering data into HMIS must ensure that Client Records have complete data elements that accurately reflect the client situation at that point in time, achieving an Error Rate³ less than the amount as specified in the Data Quality Error Rate Thresholds Table below.

Data Quality Error Rate Thresholds

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|-----------------------|----------------------------------|-------------------|--|--|----------------------------|--|
| Project Descriptor | Organization Information | All Projects | Creation and reviewed annually | All Projects | 0% | 0227 Project Descriptor Elements Data Quality |
| Project Descriptor | Project Information | All HMIS Projects | Creation and reviewed annually | All HMIS Projects | 0% | 0227 Project Descriptor Elements Data Quality Housing Inventory Count |
| Project Descriptor | Continuum of Care Information | All HMIS Projects | Creation and reviewed annually | All HMIS Projects | 0% | 0227 Project Descriptor Elements Data Quality Housing Inventory Count |
| Project Descriptor | Funding Sources | All HMIS Projects | Creation and reviewed annually | All HMIS Projects | 0% | 0227 Project Descriptor Elements Data Quality Housing Inventory Count |
| Project Descriptor | Bed and Unit Information | All HMIS Projects | Creation and re- assessed quarterly | ES, SH, TH, RRH, PSH, and all PH. | 0% | 0227 Project Descriptor Elements Data Quality Housing Inventory Count |
| Project Descriptor | HMIS Participation Status | All HMIS Projects | Creation and | All HMIS Projects | 0% | – TBD |

² HMIS Projects are projects that are dedicated to ending or preventing homelessness such as Street Outreach (SO), Emergency Shelter (SO), Transitional Housing (TH), Safe Haven (SH), all Permanent Housing (PH - RRH, PSH, Other), Supportive Services only (SSO), and Coordinated Entry (CE).

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³ Error Rate includes null, client doesn't know, client refused/client prefers not to answer, data not assessed, and incongruent data.

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|---|---|-------------------|---|--|----------------------------|--|
| | | | reviewed annually | | | |
| Project Descriptor | CE Participation Status | All HMIS Projects | Creation and reviewed annually | All HMIS Projects | 0% | – TBD |
| Universal Data Element | Name and Name Data Quality | All Clients | Record Creation | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Data Element | ^⁴ Full or last 4 of the Social Security Number (SSN) and SSN Data Quality | All Clients | Record Creation | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Universal Data Element | Date of Birth and Date of Birth Data Quality | All Clients | Record Creation | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Data Element | Race and Ethnicity | All Clients | Record Creation | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Data Element | Gender | All Clients | Record Creation | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Data Element | Veteran Status | All Adults | Record Creation | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Universal Project Stay Element | Disabling Condition (Y/N) | All Clients | Project Start | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Universal Project Stay Element | Project Start Date | All Clients | Project Start | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Universal Project Stay Element | Destination at Exit | All Clients | Project Exit | Emergency Shelter (ES) and Street Outreach (SO) All Other HMIS Projects | 21% | Data QualityFrameworkAPRESG CAPER |

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⁴ Agencies should check with their funder to determine if the full vs. last 4 of the SSN is a requirement for their program.

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|---|---|---|--------------------------------------|-------------------------------------|----------------------------|--|
| Universal Project Stay Element | Relationship to Head of Household | All Clients | Project Start | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Project Stay Element | Client Location | Head of Household | Project Start, Update | All HMIS Projects | 5% | Data QualityFrameworkAPRESG CAPER |
| Universal Project Stay Element | Prior Living Situation and related fields | Head of Household, Adults | Project Start | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Program Specific Data Element | Income | Head of Household, Adults | Project Start, Update, Exit | All HMIS Projects | 10% | Data QualityFrameworkAPRESG CAPER |
| Program | | | | ES | 49% | Data Ovality |
| Specific | In a a ma a | Head of | Annual | SO | 90% | Data QualityFramework |
| Data Element | Income | Household, Adults | Aimuai | All Other HMIS Projects | 20% | APRESG CAPER |
| | | Head of | Project Start, Update, | ES | 49% | Data Quality |
| Program | Non-Cash Benefits | | | SO | 90% | Framework |
| Specific | | Household, Adults | Annual, Exit | All HMIS Projects | 10% | APRESG CAPER |
| | | | | ES | 49% | |
| Program | Health Insurance | All Clients | Annual | SO | 90% | APRESG CAPER |
| Specific | ricatti ilisurance | All Clicits | Aimuai | All Other HMIS Projects | 20% | - L3G CAPEN |
| Program Specific | Disability | All Clients Project Start, Update, Exit | | All HMIS Projects | 10% | APRESG CAPER |
| Program Specific | Domestic Violence | Head of Household, Adults | Project Start, Update | All HMIS Projects | 10% | APRESG CAPER |
| Program Specific | Current Living Situation | Head of Household, Adults | At occurrence | Coordinated Entry (CE) and SO | 10% | – ESG CAPER |
| Program Specific | Engagement | Head of Household, Adults | At occurrence | SO | NA | - ESG CAPER |
| Program Specific | Coordinated Entry Assessment | Head of Household | At Occurrence | Coordinated Entry | NA | - TBD |

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|---|----------------------------------|-------------------------------------|---|-------------------------------|----------------------------|--|
| Program Specific | Coordinated Entry Event | Head of Household | At Occurrence | Coordinated Entry | NA | – TBD |
| Federal Partner Program Specific | Percent of AMI | Head of Household, Adults | Project Start, Update, Annual, Exit | All HMIS Projects | 10% | Basic Demographic and EE Details SSVF Export (for SSVF projects only) |
| Federal Partner Program Specific | Moving On Assistance | Head of Household | At occurrence | PSH | NA | – TBD |
| Federal Partner Program Specific | Translation Assistance Needed | Head of Household | Project Start | All HMIS Projects | NA | – TBD |
| Federal Partner Program Specific | Housing Assessment at Exit | All Clients | Project Exit | НР | NA | – TBD |
| Federal Partner Program Specific | Connection with SOAR | Head of Household and Adults | Project Start, Update, Annual, and Exit | SSVF HP and RRH | NA | – TBD |
| Federal Partner Program Specific | Referral Source | Head of Household and Adults | Project Start | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Sexual Orientation | Head of Households and Adults | Project Start | PSH and All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Last Grade Completed | Head of Household and Adults | Project Start and Exit | All VASH, SSVF, and RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | School Status | Head of Household and Adults | Project Start and Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Employment Status | Head of Household and Adults | Project Start and Exit | All VASH, SSVF, GPD | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|---|---|---------------------------------|------------------------------|---------------------|----------------------------|--|
| Federal Partner Program Specific | General Health | Head of Household and Adults | Project Start and Exit | All VASH and RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | Dental Health | Head of Household and Adults | Project Start and Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Mental Health Status | Head of Household and Adults | Project Start and Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Pregnancy Status | Head of Household and Adults | Project Start and Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Formerly a Ward of Child Welfare/Foster Care Agency | Head of Household and Adults | Project Start | All RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | Formerly a Ward of Juvenile Justice System | Head of Household and Adults | Project Start | All RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | Family Critical Issues | Head of Household and Adults | Project Start | All RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | RHY Service Connections | Head of Household and Adults | At Occurrence | All RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | Commercial Sexual Exploitation/Sex Trafficking | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Labor Exploitation/Trafficking | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |

| Element Type | Data Element | For Whom | Collection Point | Project Type | Error Rate Threshold | Tools to Measure |
|---|------------------------------|--|---------------------|--------------------|----------------------------|---|
| Federal Partner Program Specific | Project Completion Status | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY Data Completeness Hashed HMIS CSV and RHYMIS |
| Federal Partner Program Specific | Counseling | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Safe and Appropriate Exit | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Aftercare Plans | Head of Household and Adults | Project Exit | All RHY | NA | 0263 RHY DataCompletenessHashed HMISCSV andRHYMIS |
| Federal Partner Program Specific | Veteran's Information | All Veterans | Project Start | All VA and VASH | NA | – SSVF Data Quality |
| Federal Partner Program Specific | Services Provided - SSVF | All clients receiving services | At Occurrence | All SSVF | NA | – SSVF Data Quality |
| Federal Partner Program Specific | Financial Assistance – SSVF | All clients receiving financial assistance | At Occurrence | All SSVF | NA | – SSVF Data Quality |
| Federal Partner Program Specific | VAMC Station Number | Head of Household | Project Start | All VA and VASH | NA | – SSVF Data Quality |
| Federal Partner Program Specific | HP Targeting Criteria | Head of Household | Project Start | SSVF HP | NA | – SSVF Data Quality |
| Federal Partner Program Specific | HUD VASH Voucher Tracking | Head of Household/Veteran | At Occurrence | VASH | NA | – TBD |
| Federal Partner Program Specific | HUD VASH Exit Information | Head of Household/Veteran | Project Exit | VASH | NA | – TBD |

Timeliness

To ensure accuracy of our data at any given time, HMIS data entry is to be completed in less than 7 days of the client interaction. Timeliness standards apply to all projects and information collected and entered into HMIS, including but not limited to assessment data, project entries, annual reviews, project exits, and service transactions.

Our committee has determined timeliness thresholds for Entry and Annual reviews, as shown in the Timeliness Thresholds table below, with the goal of continued improvement over time. No project can retroactively improve this measure but can establish protocols to help ensure timely data entry going forward. Given our HMIS's capabilities, we have determined that we are unable to provide an accurate measure of timeliness at Exit. We will continue to work with our Vendor to address this matter and will utilize quarterly point-in-time reporting and project specific reports to help ensure timely project exits.

Timeliness Thresholds

| Timeliness Measure | Description | Project Type | Threshold: 7+ Days | Tools to Measure |
|-----------------------|--|---|-----------------------|---|
| Program Start | A Program Start Date will be created less than 7 days from the first day of service (ES, TH, SSO), contact (SO), or eligibility determination (all PH). The Program Start Date will be equal to the first day of service (ES, TH, SSO), contact (SO), or eligibility determination (PH). | All HMIS Projects | 25% | Data Quality Framework APR ESG CAPER Point-in Time/Housing Inventory Supplemental |
| Annual Review | Required for all clients in a project for 365 days or more. Annual Reviews must be completed within 30 days from the anniversary of the Head of Household's project start date. | All HMIS Projects | 25% | Data Quality Framework APR ESG CAPER Annual Review Dashboard Report |
| Program Exit | A Program Exit Date will be recorded in HMIS in less than 7 days of learning of the client's last service date or residence date. The Exit Date will be equal to the last day of service or residence. | All HMIS Projects, but SO and CE | Not Available | NONE – Our system does not capture the date an Exit record is created, but rather when the Entry/Exit record is updated. This is not an accurate reflection of when an Exit is created, therefore we are unable to accurately measure the timeliness of this data element. We recommend agencies utilize current reporting to spot check for accurate service and bed utilization. Those reports include: Data Quality Framework APR ESG CAPER Point-in Time |

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| Timeliness Measure | Description | Project Type | Threshold: 7+ Days | Tools to Measure |
|-----------------------|---|-----------------|-----------------------|---|
| Program Exit | A Program Exit Date will be recorded in HMIS in less than 7 days of learning of the client leaving the program, or when it has been 30 days since the last Contact (tracked in Current Living Situation). The Exit Date will be equal to the last day a Contact was made. | SO, CE | Not Available | NONE – Our system does not capture the date an Exit record is created, but rather when the Entry/Exit record is updated. This is not an accurate reflection of when an Exit is created, therefore we are unable to accurately measure the timeliness of this data element. We recommend agencies utilize current reporting to spot check for accurate service and bed utilization. Those reports include: ESG CAPER Trifecta Point-in Time By Name List |

Accuracy

When collecting personal information, a client-centered approach should be used. Every client must be asked for their self-reported information. Staff observations should never be used to collect information regarding how a client identifies. Inaccurate data, whether intentional or unintentional, is generally worse than incomplete information as it allows for acknowledging gaps. Thus, it should be emphasized to clients and staff that it is better to enter nothing than to enter inaccurate information.

Agencies are required to monitor their own accuracy using some of the following guidelines:

- If using paper assessments, ensure that all required data elements are included, matching all client options and wording. DuPage has a Universal Intake form available online, <u>dupagehomeless.org/hmis/forms</u>.
- Review data quality and program specific reports for inaccurate information (a negative age, single child enrollment, minor who is a veteran, etc.)
- Confirm that the client understands what is being asked of them, they know what their options
 are, and that staff do not stray from the intent of the question.
- Audit a random sample of client records.
- Thoroughly review information with the client at program start, update, annual, and exit, ensuring the information provided is current and complete.
- Verify that the project start, annual review, and exit dates are accurate and complete for all participants. (See Timeliness Threshold Table).

Training

End User training is a major component to a data quality plan. The roles and responsibilities of training users is outlined in the following: Section 1 of this SOP, DuPage Continuum of Care and HMIS Memorandum of Understanding, HMIS Partnership Agreement, Agency Data Administrator Agreement, and the End User Agreement.

All users must complete new user training prior to receiving access to the HMIS. Training may be provided through the System or Agency Data Administrator. New user training must review the Standard Operating Procedures, HMIS software, and the data entry workflow, in addition to any project specific information. Users will be expected to demonstrate understanding and proper data entry workflow prior to obtaining access to the live site. Alternative training modules may be required depending on the user's role and access in the system.

To stay current and maintain access to HMIS, all Users must complete an annual training provided by System Administrators. Training topics will include privacy, security, data standards, and common issues and questions.

Agency Data Administrators or an agency/program representative shall participate in Agency Data Administrator trainings, and in turn relay this and all HMIS related information to the agency users.

If, at any time, a user is not able to demonstrate proper use or knowledge of the system or has not completed the required training, they will lose access to the system.

Consistency

The ability to accurately generate system-level reports is dependent upon a common understanding of the data being captured, options being provided to the client, ensuring only the client responses are being entered, and all tools meeting minimum data collection requirements where data is not directly captured in HMIS. It is up to each agency to ensure adherence to HMIS Staff approved data entry workflows.

Monitoring Data Quality

Monitoring Data Quality is a shared responsibility between the participating agency, HMIS Staff and the Data & Performance Committee. Each of the 5 elements of data quality (Completeness, Timeliness, Accuracy, Training and Consistency) is to be monitored.

Agency and Program data quality is to be monitored by the Agency Data Administrator monthly. Each agency may choose different reports to monitor their data quality. Each Agency Data Administrator should work with the HMIS Staff to ensure they are running correct data quality reports. HMIS Staff may set up a schedule by which agencies are required to submit specific data quality reports to the HMIS Lead for review.

As a guideline, the HUD CoC APR is the recommended report for monitoring program data quality. It touches on all areas of data quality and allows Agency Data Administrators an opportunity to simultaneously monitor project performance. The following reports should additionally be considered for monitoring data quality:

| Agency Reports | Annual Performance Report (APR)/ESG CAPER | Data Quality Framework | Point-In-Time and Housing Inventory Reports | Project specific reports | Frequency |
|--------------------------|--|------------------------|--|--------------------------|------------------------------|
| Data Completeness | x | х | х | х | Monthly or more frequently |
| Incongruities | х | х | х | х | Monthly or more frequently |
| Timeliness of Data Entry | х | х | х | х | Monthly or more frequently |
| Project Performance | х | | х | x | Quarterly or more frequently |

System data quality & performance is to be monitored by the HMIS Lead monthly. This may be done by requesting agencies to submit specified data quality reports and/or monitoring data quality directly in the system. The HMIS Lead should report any concerns to the Data & Performance Committee.

| System Reports | Annual Performance Report (APR) | Data Quality Framework | Duplicate Client | User Last Login | Point-In-Time and Housing Inventory Reports | System Performance Measures | Longitudinal System Analysis (LSA) | Frequency |
|-----------------------|---------------------------------|------------------------|------------------|-----------------|--|-----------------------------|---------------------------------------|----------------------------------|
| Data Quality | х | х | х | | х | х | х | Quarterly or more frequently |
| System Utilization | | | | х | | | | Monthly or more frequently |
| System Performance | | Х | | | х | х | х | Semi-Annually or more frequently |