# HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) DATA QUALITY PLAN

## Indianapolis Continuum of Care

The Data Quality Plan identifies responsibilities of all parties within the CoC, establishes terms and benchmarks, and outlines policies and procedures for data monitoring.

Approved by Blueprint Council 12.13.21
Revised 06.27.23
information@indycoc.org

# TABLE OF CONTENTS

1. Introduction
   a. Purpose and Intent
   b. Key Terminology
      i. Data Quality
      ii. Data Quality Plan
      iii. Data Quality Monitoring Plan
      iv. HMIS
   c. Helpdesk
   d. HMIS Software

2. Data Elements
   a. Universal Data Elements
   b. Program Specific Enrollments

3. Benchmarks
   a. Completeness
   b. Timeliness
   c. Accuracy
   d. Bed Utilization

4. Monitoring
   a. Target
   b. Roles and Responsibilities
   c. Monitoring Frequency
   d. Compliance
   e. Appeals

5. Resources
   a. Data Standards
   b. Federal Partner Program Manuals
   c. Report Manuals

## INTRODUCTION

This document describes the Indianapolis Continuum of Care (CoC) (IN-503) data quality plan. Developed as a collaborative effort between the HMIS Lead Agency (Coalition for Homelessness Intervention and Prevention - CHIP) and service provider agencies, the data quality plan was specifically created by the Data Quality Plan Workgroup. Standards and policies were established to meet the requirements set forth by the Department of Housing and Urban Development (HUD) and to achieve accurate, reliable, and timely data collection across projects and across the homeless response system. Quality and timely data are vital to inform planning, to assess program and system-level outcomes, to evaluate progress and performance, and to inform investment and the most impactful use of funds.

## Purpose and Intent

The Indianapolis Data Quality Plan identifies responsibilities of all parties within the CoC, with respect to data quality, and establishes terms and benchmarks. The plan also outlines policies and procedures for monitoring adherence to data quality standards.

## Key Terminology

1. Data Quality – Refers to the reliability and validity of client-level data collected in HMIS. The components of data quality are completeness, timeliness, and accuracy. The rationale for each component is as follows:
   a. Completeness – Complete data ensures that reporting reflects the extent and characteristics of people experiencing homelessness and patterns of people in the homeless assistance system. It also helps ensure people experiencing homelessness receive services to secure and maintain permanent housing.
   b. Timeliness – Data entered as close as possible to the activity reduces errors that occur when too much time has elapsed between data collection and data entry. Timely data also ensures that data is accessible when needed for monitoring, reporting, and data requests.
   c. Accuracy – Accuracy ensures that HMIS reflects the reality of people experiencing homelessness and the programs that serve them.
2. Data Quality Plan – A community-level document that facilitates the CoC's ability to achieve valid and reliable data.
3. Data Quality Monitoring Plan – A set of procedures outlining a regular, on-going process for analyzing and reporting on the reliability and validity of data entered in HMIS at both the program and aggregate system levels.
4. HMIS – Homeless Management Information System

## Helpdesk

In order to provide support and resolve technical issues, CHIP uses the Mojo Help Desk ticketing system. This system may be used by any project using HMIS, for both client-level and user issues. The link to the helpdesk can be found at https://indyhmis.mojohelpdesk.com/mytickets/create#/ticket-form/19909.

## HMIS Software

The Indianapolis CoC uses ClientTrack, a software product of Eccovia Solutions. For the purposes of this document, HMIS refers to the data, assessments, and reports contained therein.

## DATA ELEMENTS

| UNIVERSAL IDENTIFIER ELEMENTS | UNIVERSAL PROJECT STAY ELEMENTS | PROGRAM SPECIFIC DATA ELEMENTS |
|---|---|---|
| 3.01 Name | 3.08 Disabling Condition | 4.02 Income and Sources |
| 3.02 Social Security Number | 3.10 Project Start Date | 4.03 Non-Cash Benefits |
| 3.03 Date of Birth | 3.11 Project Exit Date | 4.04 Health Insurance |
| 3.04 Race | 3.12 Destination | 4.05 – 4.10 Specific Disabling Conditions |
| 3.05 Ethnicity | 3.15 Relationship to Head of Household | 4.11 Domestic Violence |
| 3.06 Gender | 3.16 Client Location | 4.12 Current Living Situation |
| 3.07 Veteran Status | 3.917 Prior Living Situation | 4.13 Date of Engagement |

## BENCHMARKS

### Completeness

All clients in HMIS are expected to have their required data elements recorded as completely as possible. Complete data allows for the homeless system to provide appropriate services to clients and accurately report system performance and needs.

For the purposes of this data quality plan, all fields listed above with no response or a response of "Data not collected", "Client doesn't know", and "Client refused" constitute missing data, with the exception of the social security number and race fields. For these two fields, data is only considered missing if the response was recorded or the response record was "Data not collected." The project exit date does not count toward completeness, but if one is recorded then the destination must also be recorded. Current living situation only counts toward completeness for street outreach and coordinated entry programs; other program types can collect this but are not required to do so. Date of engagement is only required for street outreach programs, and data quality standards are not enforced prior to the date of engagement. Below is a list of bed utilization and completeness benchmarks by project type. Completeness thresholds for each project type are as follows:

| MINIMUM COMPLETENESS THRESHOLD | | | |
|---|---|---|---|
| | UNIVERSAL IDENTIFIER ELEMENTS | UNIVERSAL PROJECT STAY ELEMENTS | PROGRAM SPECIFIC DATA ELEMENTS |
| STREET OUTREACH* | 95% | 93% | 93% |
| SAFE HAVEN | 97% | 97% | 97% |
| EMERGENCY SHELTER | 90% | 93% | 80% |
| COORDINATED ENTRY | 97% | 99% | - |
| TRANSITIONAL HOUSING | 97% | 97% | 97% |
| RAPID RE-HOUSING | 99% | 99% | 99% |
| PERMANENT SUPPORTIVE HOUSING | 99% | 99% | 99% |
| DAY SHELTER | 95% | 93% | 93% |
| SERVICES ONLY | 95% | 93% | 93% |

*Street outreach programs do not technically have any completeness requirements until the date of engagement is entered. Two completeness reports will be available for street outreach, one based on all clients enrolled and one based on just those with a date of engagement.

**Timeliness**

Data entered in a timely manner reduces potential errors when too much time has passed between data collection and entry. Timely data is also essential for the generation of by-name lists, an effective coordinated entry, accurately reflecting experiences of individuals and households experiencing homelessness, and accurate monitoring and system-wide reporting. Data entry for the project enrollment and exit is required within eight days of the enrollment or exit event.

**Accuracy**

Accurate data ensures that HMIS reflects reality as closely as possible. All data in HMIS should match the information reported by the client and documentation in the client's file. Data should also reflect accurate information about housing and services the client received.

Data Accuracy – The percentage of client files with inaccurate HMIS data should not exceed 5%. When identifying documents are uploaded to HMIS, they should be attached to the person they belong to, in order to ensure that files stay with the right person regardless of household composition changes. Name, date of birth, SSN, and veteran status are the Universal Identifier Elements that can be compared to documentation for accuracy; race, ethnicity, and gender are all self-reported elements and are not necessarily expected to match documentation on file. Data to be reviewed includes:

1. Universal Identifier Elements
2. Universal Project Stay Elements
3. Program Specific Data Elements

The HMIS Lead Agency will review data elements in addition to supporting documents associated with eligibility and CoC outcomes. The HMIS Lead will also review a reasonable sample of files.

**Bed Utilization**

One of the primary features of HMIS is the ability to record the number and length of client stays by project type. Low utilization rates could indicate a project is not very full, but it could also mean clients are being served without being entered in HMIS. On the other hand, high utilization rates could mean the project is over capacity, but it could also mean the program staff did not properly exit clients from the system. The utilization rate is determined by dividing the number of clients entered into a project by a project's slots, units, or bed inventory. Generally, programs that can serve a set number of households (such as shelters with rooms designated for families, or housing programs with a specific number of vouchers) have their utilization determined by comparing the number of units available to the number of households served, and programs that serve individuals (like a shelter with bunk beds) have their utilization determined by comparing the number of beds available to the number of people served. The following are expected ranges for bed/utilization rates:

| EXPECTED UTILIZATION RANGE | | | |
|---|---|---|---|
| | DETERMINATION METHOD | MINIMUM EXPECTED UTILIZATION | MAXIMUM EXPECTED UTILIZATION |
| SAFE HAVEN | BEDS | 80% | 110% |
| EMERGENCY SHELTER (FAMILY) | UNITS | 80% | 110% |
| EMERGENCY SHELTER (SINGLES) | BEDS | 80% | 110% |
| TRANSITIONAL HOUSING | UNITS | 80% | 110% |
| RAPID RE-HOUSING | UNITS | 90% | 100% |
| PERMANENT SUPPORTIVE HOUSING | UNITS | 90% | 100% |

**MONITORING**

The purpose of monitoring data quality is to ensure the agreed-upon data quality targets are met to the greatest extent possible, best practices are encouraged, and data quality issues are quickly identified

and resolved. Data quality monitoring is intended to proactively address data quality issues and not be a punitive process. The CoC recognizes HMIS data is critical in meeting the reporting and compliance requirements of HUD, individual agencies, and the CoC as a whole. Data quality monitoring will be incorporated into quarterly data labs.

### Target

When data quality benchmarks are met, reporting will be more reliable and can be used to evaluate service delivery, program design and effectiveness, and system efficiency. All HMIS participating 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 HMIS Lead Agency with the full support of the CoC.

### Roles and Responsibilities

1.  HMIS Lead Agency
    a.  Data Completeness **–** HMIS support staff will measure completeness and compare any missing rates to the data completeness benchmarks.
    b.  Data Timeliness **–** HMIS support staff will measure timeliness using the HMIS Data Entry Timing report and provide reports to each agency.
    c.  Data Accuracy **–** HMIS support staff will review source documentation during the annual site visits. For the annual site visit policies, see the HMIS Site Visit Standard Operating Policy document. Outreach programs may be exempt from data accuracy review.
    d.  Technical Assistance – The HMIS Lead Agency will be responsible for providing technical assistance and support to agencies.
2.  HMIS Participating Agency
    a.  Compiling and Reviewing Data Quality Reports **–** Agencies are responsible for providing necessary information or support documentation to complete the development of data quality reports, including documentation for Data Accuracy review. Agencies are also responsible for reviewing data quality reports.
    b.  Data Quality – Agencies are responsible for meeting data quality benchmarks.

### Monitoring Frequency

Data quality monitoring may be performed outside of the regularly scheduled reviews if requested by program funders, agencies, or other interested parties, with approval of the agency(s).

1.  Data Completeness, Data Timeliness, and Bed Utilization
    a.  Quarterly Review
2.  Data Accuracy
    a.  Annual Review

### Compliance

If an agency does not meet data quality benchmarks, a notification will be sent to the participating agency's HMIS administrator and the individual that signed the HMIS agency agreement to request compliance and offer technical support. If the agency does not meet benchmarks by the next relevant reporting period, the agency will provide a written response within 15 days after receiving notification to the HMIS Lead Agency and must include the following: steps to improve performance, a timeline to begin incremental improvement and meet benchmarks, and any extenuating circumstances around performance. Please follow this link to complete and submit the written response.

If the agency fails to provide the written response or meet data quality benchmarks over the established timeframe, or if there are repeated or egregious data quality errors, the HMIS Lead Agency will report such non-compliance issues to the CoC Blueprint to seek further support to improve the data quality issues.

### Appeals

If for any reason an agency deems they have been misrepresented in the data quality review process established in this document or that the data provided by the HMIS Lead Agency is not accurate, they may complete an appeal to be reviewed by a committee of non-conflicted members. Please follow this link to complete and submit a formal appeal.

The following information outlines the appeals process:
1. Project outcomes on the data quality benchmarks will be posted as part of the quarterly review.
2. An email will be sent to all persons identified as project representatives.
3. All appeals must be submitted electronically at the link above. A return receipt will be sent electronically to confirm receipt of the appeal.
4. The appeal must include a written statement specifying in detail each one of the grounds asserted for the appeal. The appeal must be completed by an individual authorized to represent the sponsor agency (i.e., Executive Director). The appealing agency must specify facts and evidence sufficient for the appeals committee to determine the validity of the appeal. Specifically, the notice of appeal must include the specific areas of the monitoring document or Data Quality Plan policy being appealed and also clearly explain why the information provided is adequate to gain additional points.
5. All valid appeals will be read, reviewed, and evaluated by the appeals committee. The agency making the appeal will be invited to represent their appeal in front of the appeal committee.
6. HMIS support staff will ensure agencies receive in writing the appeal response, and if applicable, an updated monitoring document.
7. If necessary, HMIS support staff will establish steps to improve data quality measures along with the appealing agency.

### RESOURCES

### Data Standards

FY2022 HMIS Data Standards represent the foundation for the data contained within HMIS, project setup instructions, and data collection instructions. This is a complete document that merges what was formerly separated into the Dictionary and Manual documents.

**Federal Partner Program Manuals**

The Continuum of Care (CoC) Program HMIS Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and CoC Program recipients. This manual provides information on HMIS program setup and data collection guidance specific to the CoC Program.

The Emergency Solutions Grants (ESG) Program HMIS Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and ESG recipients and subrecipients. This manual provides information on HMIS program setup and data collection guidance specific to the ESG Program.

The Veterans Affairs (VA) Programs HMIS Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and VA Program grantees. This manual provides information on HMIS program setup and data collection guidance specific to the VA Programs that use HMIS.

The Projects for Assistance in Transition from Homelessness (PATH) Program HMIS Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and PATH Program grantees. This manual provides information on HMIS program setup and data collection guidance specific to the PATH Program. This manual only addresses the use of HMIS for the PATH Program.

The Runaway and Homeless Youth (RHY) Program HMIS Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and RHY Program grantees. This manual provides information on HMIS program setup, data entry, data collection guidance specific to this program, and reporting guidance for projects receiving funding from the RHY Program.

The Housing Opportunities for Persons With AIDS (HOPWA) HMIS Program Manual is intended to support data collection and reporting efforts of HMIS Lead Agencies and HOPWA Program grantees. This manual provides information on HMIS program setup and data collection guidance specific to the HOPWA Program.

**Report Manuals**

HMIS Standard Reporting Terminology Glossary  is designed to provide HMIS systems and their programmers a foundation upon which they can best program HMIS-required reports. The HMIS Standard Reporting Terminology Glossary contains the report specifications for the data quality report, which was used to gather the benchmarks.

CoC APR and ESG CAPER HMIS Programming Specifications detail the business rules required for the HUD CoC Annual Performance Report (APR) and ESG Consolidated Annual Performance and Evaluation Report (CAPER). These programming specifications are used to generate the CoC APR and ESG CAPER CSV files which are submitted in the Sage HMIS Reporting Repository.