A Home for Everyone HMIS Data Quality Plan
OR-501: Portland, Gresham, and Multnomah County
2018

Executive Summary

Data quality is an essential part of our work in the Homeless Management Information System (HMIS). Attention to quality ensures that the data that staff work hard to enter is useful to their agency and to other HMIS stakeholders. As described in the NWSSC Policy & Procedures, **all users play a role in supporting data quality**. By doing so, they provide benefits on multiple levels by supporting effective decisions, informed case management, and competitiveness for funding.

Maintaining compliance with federal regulations, the **Data Quality Plan outlines the minimum benchmarks that all programs serving homelessness in our community are accountable to meet**. Our goals target the essential qualities of good data—**completeness, accuracy, and timeliness**—to ensure statistically reliable data.
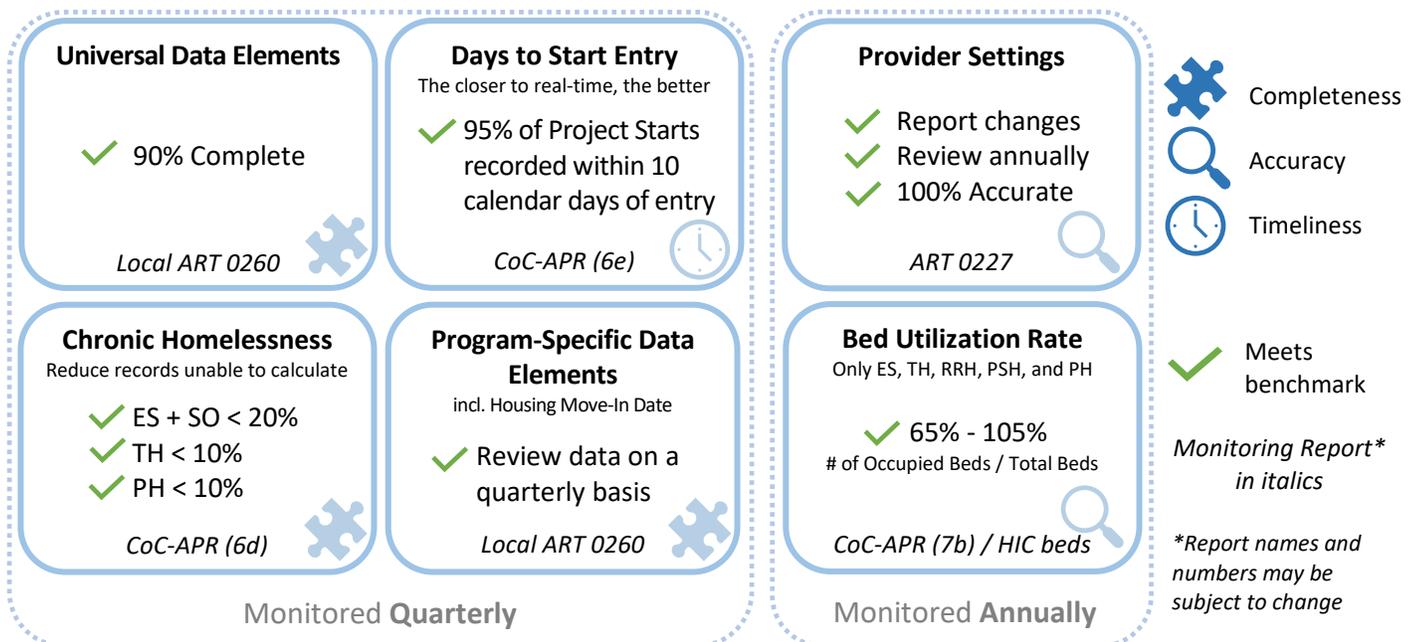
Tools and resources are available to help agencies meet or exceed the community benchmarks. Certain funders or programs may have more restrictive requirements which supersede this general plan. This and several other documents collectively form the local HMIS guidance and policies.

AHFE Data Quality Benchmarks

The following general benchmarks are monitored quarterly and annually to maintain a standard level of data quality across all applicable providers. Monitoring may be performed by a contract manager or an administrator.

We will celebrate successes through recognition at meetings and offer assistance to those that are still working towards the goals. For programs that fall below the benchmarks, the appropriate system administrator will reach out to the agency to investigate the reasons. They with work with the agency to cooperatively develop an improvement plan, to which the agency will be accountable.

For additional details, as well as program-specific expectations on timeliness and missing values, see AHFE Data Expectations and Exceptions.

Universal Data Elements

✓ 90% Complete

Local ART 0260

Days to Start Entry
The closer to real-time, the better

✓ 95% of Project Starts recorded within 10 calendar days of entry

CoC-APR (6e)

Provider Settings

✓ Report changes
✓ Review annually
✓ 100% Accurate

ART 0227

Chronic Homelessness
Reduce records unable to calculate

✓ ES + SO < 20%
✓ TH < 10%
✓ PH < 10%

CoC-APR (6d)

Program-Specific Data Elements
incl. Housing Move-In Date

✓ Review data on a quarterly basis

Local ART 0260

Bed Utilization Rate
Only ES, TH, RRH, PSH, and PH

✓ 65% - 105%
# of Occupied Beds / Total Beds

CoC-APR (7b) / HIC beds

Monitored **Quarterly**

Monitored **Annually**

Completeness

Accuracy

Timeliness

✓ Meets benchmark

Monitoring Report* in italics

*Report names and numbers may be subject to change

Common Reports that Rely on Good Data Quality

Report Name*	Abbr.	Type	Reviewed	System	Agency
Annual Performance Report	CoC-APR	Canned[†]	At least once per quarter	✔	✔
0260 - CoC APR Data Quality/Completeness	0260	ART	At least once per quarter	✔	✔
Data Completeness Grade (0260)	Local 0260	ART	At least once per quarter	✔	✔
Participant Demographic Report	PDR	ART	At least once per quarter	✔	✔
System Performance Measures (i.e. 700 series)	SPM	ART	Quarterly	✔	
Longitudinal System Analysis	LSA	ART	Annually	✔	
0640 - HUD Data Quality Report Framework	0640	ART	Annually	✔	
Housing Inventory Count (HIC): 0628 - HIC Supplement, 0629 - Housing Inventory Count	0628, 0629	ART	Annually	✔	
Point-in-Time (PIT) Count: 0630 - Sheltered-Unsheltered PIT	0630	ART	Annually (PIT is usually last Wed in Jan), (Unsheltered counts are biannual)	✔	

*Report names and numbers may be subject to change   †Vendor-made "canned" reports are accessible to all users

Helpful Resources

▸ **Technical assistance support** by PHB, YFS, and JOHS
▸ **Agency Admin/Key User meetings** every other month
▸ **Ongoing meetings and focus groups** convened by PHB, YFS, and JOHS
▸ **Training recordings, handbooks, and FAQs** available online or from your trainer
▸ **Definitions List** (in progress): Definitions and clarification on terms (e.g. *homelessness)* used in Multnomah County. Aligns common terms for easier contract management and comparability.
▸ **Data Quality Toolkit** (in progress): Modular, step-by-step guides for users. Targets common issues based on user feedback. Explains what reports to use, how to fix errors, and useful tips.

Strategic Focus Areas

These strategic areas guide the work of system leads and workgroups to build a sustainable process. Although not quantitatively monitored, agencies may find these helpful for a holistic approach to improving data quality. All agencies are welcome to get involved—share your knowledge and successes, receive advice and ideas, and leverage community resources and domain expertise.

💡	**Training**	How do we improve clarity, understanding, and consistency? How can we make our materials more accessible and user-friendly? How do we promote data quality in our work culture?
💬	**Communication**	What are your goals and priorities? How do we make HMIS jargon easier to understand? How do we better communicate funder and grantee requirements?
👥	**Multi-level support**	Do our users feel supported? Do they know where to find help? Who are our community experts? Can we get buy-in from agency managers and directors? Who would be good potential liaisons to connect end users and HMIS leads?
⚙	**Accountability**	How do we build accountability between all levels? Many people have a part in this: end users, administrators, case managers, contract managers, directors, etc.

AHFE Quarterly System Reporting

All AHFE projects are reviewed on a quarterly basis using cumulative reports that include prior quarters in the same fiscal year. Be mindful of these dates when scheduling data clean-up. It is important to have the data as accurate as possible for each run.

▸ **Reporting dates**

October 15	January 15	April 15	July 15
Q1	Q1 & 2	Q1, 2 & 3	Fiscal Year

Revision History

Version	Release Date	Description	Posted By
V1.0	11/15/2018	2018 version released	M. Helm
V1.0	03/21/2019	Minor correction. Under Common Reports, "Longitudinal Study Analysis" corrected to "Longitudinal System Analysis"	M. Helm
V1.0	04/09/2019	Bed Utilization Rate callout – bottom line corrected from 8b to 7b. Added that 7b is divided by HIC beds to calculate utilization rate	M. Helm