



**Kansas Statewide**  
Homeless Coalition

2020

Kansas Balance of State Continuum of Care  
Homeless Management Information System  
Data Quality Plan



## Contents

INTRODUCTION .....	1
What is a Data Quality Plan?.....	1
HMIS Data Standards.....	1
TIMELINESS .....	2
Timeliness Standards .....	2
COMPLETENESS.....	2
Universal Data Elements.....	3
Target.....	3
All Clients Served .....	3
Target.....	3
Bed Utilization .....	3
Target.....	3
ACCURACY.....	3
Target.....	4
CONSISTENCY .....	4
Target.....	4
MONITORING .....	4
Target.....	4
Roles and Responsibilities.....	4
Monitoring Frequency .....	5
Compliance .....	5
Quality Reporting and Outcomes .....	5
INCENTIVES AND ENFORCMENT .....	5
Target.....	6

Appendix A	Target – Universal Data Elements
Appendix B	Data Quality Certification – Emergency and Day Shelter
Appendix C	Data Quality Certification – Permanent, Transitional Housing and Supportive Services only
Appendix D	Data Quality Certification – Street Outreach

## **INTRODUCTION**

This document describes the Homeless Management Information System (HMIS) data quality plan for Kansas Balance of State Continuum of Care (KS BoS CoC). The document includes a data quality plan and protocols for ongoing data quality monitoring that meets requirements set forth by the Department of Housing and Urban Development (HUD). It is developed by the COC and Kansas Housing Resource Corporation (HMIS Lead Agency), in coordination with the HMIS participating agencies and community service providers. This HMIS Data Quality Plan is to be reviewed and updated annually, considering the latest HMIS data standards and locally developed performance plans.

### **What is a Data Quality Plan?**

A data quality plan is a community -level document that facilitates 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 throughout the community.

Developed by the HMIS Committees 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 a timeframe for monitoring data quality on a regular basis.

### **HMIS Data Standards**

In 2010 the U.S. Interagency Council on Homelessness (USICH) affirmed HMIS as the official method of measuring outcomes in its Opening Doors: Federal Strategic Plan to Prevent and End Homelessness. Since then many of the federal agencies that provide McKinney-Vento Act and other sources of funding for services to specific homeless populations have joined together and are working with HUD to coordinate the effort.

HUD and other federal partners routinely release updates and revisions to the HMIS Data Standards. As these documents are released each document contains a date to replace the previous version of the HMIS Data Standards. HMIS Data Standards guide client- and program-level data collection and reporting specifications. HUD Data Standards identify Universal Data Elements, and Program Specific Data Elements which are required of all homeless programs participating in the HMIS. Frequency of data collection and subsequent entry into the HMIS are also required.

HMIS is now used by the federal partners and their respective programs to end homelessness, which includes:

- U.S. Department of Housing and Urban Development (HUD)
  - Office of Special Needs Assistance Programs (SNAPS)
  - Continuum of Care (CoC) Program
  - Emergency Solutions Grants (ESG) Program
  - Housing Opportunities for Persons with AIDS program (HOPWA)
  - HUD-Veterans Affairs Supportive Housing (HUD/VASH)
  - Rural Housing Stability Assistance Program (RHSP)
- U.S. Department of Health and Human Services (HHS)
  - Administration for Children and Families (ACYF) – Family and Youth Service Bureau (FYSB)

- Runaway and Homeless Youth (RHY)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Projects for Assistance in Transition from Homelessness (PATH)
- U.S. Department of Veteran Affairs (VA)
  - Supportive Services for Veteran Families Program (SSVF)
  - Community Contract Emergency Housing (HCHV/EH)\*
  - Community Contract Residential Treatment Program (HCHV/RT)\*
  - Domiciliary Care (HCHV/DOM)\*
  - VA Community Contract Safe Haven Program (HCHV/SH)\*
  - Grant and Per Diem Program (GPD)\*
  - Compensated Work Therapy Transitional Residence (CWT/TR)\*

2020 HUD HMIS Data Standards can be found at:

<https://www.hudexchange.info/resource/3824/hmis-data-dictionary/>

### **TIMELINESS**

Entering data in a timely manner can reduce human error that occurs when too much time has elapsed between the data collection, or service transaction, and the data entry. The individual doing the data entry may be relying on handwritten notes or their own recall of a case management session, a service transaction, or a program exit date; therefore, the sooner the data is entered, the better chance the data will be correct. Timely data entry also ensures that the data is accessible when it is needed, either proactively (e.g. monitoring purposes, increasing awareness, meeting funded requirements), or reactively (e.g. responding to requests for information, responding to inaccurate information).

#### **Timeliness Standards**

All data shall be entered into HMIS in a timely manner. Toward that end, the following data entry deadlines are set forth:

- Emergency Shelters: Universal Data Elements and Housing Check-In/Check-Out are entered within 3 workdays (72 work hours after the check-in/check-out time)
- Transitional and Permanent Supportive Housing Programs: Universal Data Elements, Program Specific Data Elements, and Housing Check-In/Check-Out are entered within 3 workdays (72 work hours after the intake)
- Rapid Re-Housing and Homelessness Prevention Programs: Universal and Program-Specific Data Elements are entered within 3 workdays (72 work hours after the enrollment/eligibility established)
- Outreach Programs: Data elements entered within 3 workdays of the first outreach encounter. Upon engagement for services, all remaining Universal Data Elements entered within 3 workdays
- Supportive Services Only Programs: Universal Data Elements are entered within 3 workdays

### **COMPLETENESS**

Complete HMIS data helps a COC meet various funding compliance requirements, and ensures that persons in the homeless assistance system receive the services needed to secure and maintain permanent housing. Additionally, it is necessary to fully understand the demographic characteristics and service use of persons accessing the homeless housing and services in the community. 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.

**Universal Data Elements**

The Continuum of Care’s goal is to collect 100% of all data elements. However, the COC recognizes that this may not be possible in all cases. Therefore, the COC has established an acceptable range of missing/null, don’t know, refused, and data not collected responses, depending on the data element and the type of program entering data.

**Target**

All data in the HMIS shall be collected and entered in a common and consistent manner across all programs. Data collection and entry should be conducted in accordance with the most current HUD HMIS Data Standards. See Appendix A

**All Clients Served**

HUD expects that all clients receiving housing and/or services through the homeless assistance system will have their service delivery documented in HMIS. If a program only enters data on a few of its clients, the program’s efficacy cannot accurately be determined. Incomplete data may erroneously reflect low bed utilization rates (for housing programs), and may inaccurately reflect client’s progress in meeting programmatic goals (i.e. employment, transitioning to permanent housing).

**Target**

All programs using the HMIS shall enter data for one hundred percent (100%) of clients served.

**Bed Utilization**

One of the primary features of the HMIS is its ability to record the number of clients stays or bed nights at a homeless residential facility. A program’s bed utilization rate is the number of beds occupied as a percentage of the entire bed inventory. When a client is enrolled into a residential program (emergency, transitional, or permanent), the client is assigned to a bed or unit. The client remains in that bed or unit until the client is transferred to another bed or unit, or are exited from the program. When the client is exited from the program, the client is also exited from the bed or unit in the 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 operating year.

**Target**

A program’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 HMIS for every client served. A high utilization rate could reflect that the program is over capacity, but it could also indicate that clients have not been properly discharged from the program in the HMIS.

Housing Program Type	Target Utilization Rate (%)	Acceptable Utilization Rate (%)
Emergency Shelter	90%	75%
Transitional Housing	100%	90%
Permanent Housing	100%	90%

**ACCURACY**

Accurate collection and entry of data into the HMIS ensures that the data is the best possible representation of reality as it relates to homeless persons and the programs that provide homeless housing and services. Data in the HMIS should accurately reflect client data recorded in the client's file, along with information known about the client and the housing and/or services received by the client.

#### **Target**

All data entered into the HMIS shall reflect information provided by the client and as documented in the client's file. Changes or updates in client information shall be reflected in the HMIS as they occur. To ensure the most up-to-date and complete data, data entry errors should be corrected at a minimum monthly, or more frequently as required.

#### **CONSISTENCY**

Consistency of data directly affects the accuracy of data. Consistency ensures that data is understood, collected, and entered in the same manner across all programs in the HMIS. Basic enrollment, annual assessment, and exit workflows/forms, designed to capture client data pursuant to HUD's HMIS Data Standards, provide for common and consistent data collection and are available to all programs. To that end, all intake and data entry staff will complete an initial training before accessing the production HMIS system.

#### **Target**

All data in the HMIS shall be collected and entered in a common and consistent manner across all programs. Data collection and entry should be conducted in accordance with the most current HUD HMIS Data Standards.

#### **MONITORING**

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.

#### **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 efficiency of the system. 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, HMIS Committees, and HMIS Staff with the full support of the COC.

#### **Roles and Responsibilities**

- **Data Timeliness:** The HMIS staff will measure timeliness by running reports in the HMIS. Programs of different types will be reviewed separately. The agency will be required to improve their data timeliness or provide explanation before the next month's report.
- **Data Completeness:** The HMIS staff, HMIS Committees will measure completeness by running APRs, Universal Data Quality, or custom reports, and compare any missing rates to the data completeness benchmarks. The agency will be required to improve their data completeness rate or provide explanation before the next month's report.

- **Data Accuracy:** The HMIS staff will review source documentation during the annual site visits. The agency staff is responsible to make this documentation available upon request. Outreach programs may be exempt from the data accuracy review.

### **Monitoring Frequency**

- Monthly Review: Data Timeliness and Data Completeness
  - Completed by the HMIS Data Usage & Reports Committee
- Annual Review – Site/Report Visits: Data Accuracy
  - Completed by the Monitoring staff
- Other: Data quality monitoring may be performed outside of the regularly scheduled reviews, if requested by program funders or other interested parties (the agency itself, HMIS Lead Agency, CoC, HUD, or other Federal and local government agencies)

### **Compliance**

- Data Timeliness: The average timeliness rate in any given month should be within the allowed timeframe.
- Data Completeness: There should be no missing (null) data for required data elements. Responses that fall under unknown (don't know or refused) should not exceed the allowed percentages in any given month. Housing providers should stay within the allowed utilization rates.
- Data Accuracy: The percentage of client files with inaccurate HMIS data should not exceed 5%. (For example, if the sampling includes 10 client files, then 9 out of 10 of these files must have the entire set of corresponding data entered correctly in HMIS.)

### **Quality Reporting and Outcomes**

Each month agencies are required to submit the Universal Data Quality report for all participating HMIS programs. Additionally, agencies are required to submit a quarterly Data Quality Certification (Appendix B) for all participating HMIS programs. The certification will include any findings and recommended corrective actions. If the agency fails to make corrections, or if there are repeated or egregious data quality errors, the HMIS Staff/Committees may notify the agency's funders or community partners about non-compliance with the required HMIS participation.

HMIS data quality certification is now part of several funding applications, including COC and ESG programs. Low HMIS data quality scores may result in denial of this funding.

### **INCENTIVES AND ENFORCEMENT**

Timely HMIS data entry ensures that the data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, responding to requests for information, or for other purposes. Complete HMIS data is necessary to fully understand the demographic characteristics and service use of persons accessing the homeless housing and services in the community. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness throughout the COC. Complete HMIS data helps the COC meet various funding compliance requirements and ensures that persons in the homeless assistance system receive the services needed to secure and maintain permanent housing. Accurate collection and entry of data into the HMIS ensures that the data is the best possible representation of reality as it relates to homeless persons and the programs that provide homeless housing and services. Consistency of data directly affects the accuracy of data. Consistency

ensures that data is understood, collected, and entered in the same manner across all programs in the HMIS.

All HMIS participating agency administrators must ensure that these minimum data entry standards are fulfilled for every program utilizing the HMIS.

**Target**

To ensure that HMIS participating agencies meet the minimum data entry standards set forth herein, a copy of this Data Quality Plan will be posted to the COC's website. Sample intake, annual update and discharge forms will also be posted to the COC's website. Participating agencies will provide data quality reports to the HMIS Committees 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 participating agencies that do not adhere to the minimum data entry standards set forth herein will be notified of their deficiencies and provided with specific information regarding the nature of the deficiencies and methods by which to correct them. HMIS participating 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 participating agencies continuing in default may have HMIS access suspended until such time as agencies demonstrate that compliance with minimum data entry standards can be reached.

## Target – Universal Data Elements

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

Universal Data Elements	PH, TH, SSO			Emergency/Day Shelter			Street Outreach		
	Target	OK % Missing Null	OK % Don't Know or Refuse	Target	OK % Missing Null	OK % Don't Know Refuse	Target	OK % Missing Null	OK % Don't Know Refuse
Name	100%	0%	5%	100%	0%	5%	75%		
Social Security Number	100%	0%	5%	100%	0%	5%	75%		
Date of Birth	100%	0%	5%	100%	0%	5%	75%		
Race	100%	0%	5%	100%	0%	5%	75%		
Ethnicity	100%	0%	5%	100%	0%	5%	75%		
Gender	100%	0%	5%	100%	0%	5%	75%		
Veteran Status	100%	0%	5%	100%	0%	5%	75%		
Disabling Condition	100%	0%	5%	100%	0%	5%	75%		
Residence Prior To Project Entry	100%	0%	5%	100%	0%	5%	100%		
Project Entry Date	100%	0%	0%	100%	0%	0%	100%		
Project Exit Date	100%	0%	0%	100%	0%	0%	100%		
Destination	100%	0%	5%	100%	0%	5%	75%		
Relationship to Head of Household	100%	0%	5%	100%	0%	5%	100%		
Client Location	100%	0%	0%	100%	0%	0%	100%		
Length of Time on Street/ES of Safe Haven	100%	0%	0%	100%	0%	0%	100%		

**Emergency Shelter and Day Shelter Program Certification**  
**Bed Utilization and Data Quality**

[Agency and Program Name]

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Data Certification for \_\_\_\_\_ Quarter of \_\_\_\_\_

Months: \_\_\_\_\_

I have reviewed the data for the period beginning on the first day of the month to the last day of the month. I have compared the aggregate data reports to the detail and result reports and have made a good faith effort to correct deficiencies in the client data shown on the reports. I have reviewed the following (as applicable to my program) and understand that the COC's goal is 100% for all Universal data elements (unless otherwise stated in the Data Quality Plan) and must provide an explanation for data elements that are below the benchmark:

**Universal Data Elements**

My agency's data quality: \_\_\_ does or \_\_\_ does not meet the COC's 90% + data completeness standard. If it does not, provide justification:

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**Program Specific Data Elements**

Percentage for entry questions are: \_\_\_ less than 90% or \_\_\_ 90% or more. Justification for less than 90% missing answers:

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Percentage for exit questions are: \_\_\_ less than 90% or \_\_\_ 90% or more. Justification for less than 80% missing answers:

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**Bed Utilization (Required for Emergency Shelter programs only)**

\_\_\_\_\_ Bed Utilization is more than 65% and less than 105% (local target is 75%)

\_\_\_\_\_ Bed Utilization is under 65%: I have verified that clients have been properly entered and exited, and verify that the bed utilization is under 65%. Justification for low utilization: \*\*Justification for high utilization:

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\_\_\_\_\_ Bed Utilization is over 105%: I have verified that clients have been properly entered and exited and verify that the bed utilization is over 105%.

\*\*Justification for high utilization:

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**Last Service Date (Required for Outreach and Supportive Services programs only)**

Clients who have not received services within the last 90 days: \_\_\_\_ have or \_\_\_\_ have not been exited from their programs. Please provide an explanation if they have not:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

**Permanent Housing, Supportive Services Only, Transitional Housing Program Certification**  
**Bed Utilization and Data Quality**

[Agency and Program Name]

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Data Certification for \_\_\_\_\_ Quarter of \_\_\_\_\_

Months: \_\_\_\_\_

I have compared the aggregate data reports to the detail and result reports and have made a good faith effort to correct deficiencies in the client data shown on the reports. I have reviewed the following (as applicable to my program) and understand that the CoC's goal is 100% for all Universal data elements (unless otherwise stated in the Data Quality Plan) and must provide an explanation for data elements that are below the benchmark:

**Universal Data Elements**

My agency's data quality: \_\_\_ does or \_\_\_ does not meet the CoC's 95% + data completeness standard. If it does not, provide justification:

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**Program Specific Data Elements**

Percentage for entry questions are: \_\_\_ less than 95% or \_\_\_ 95% or more. Justification for less than 98% missing answers:

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Percentage for exit questions are: \_\_\_ less than 80% or \_\_\_ 80% or more. Justification for less than 98% missing answers:

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**Bed Utilization**

\_\_\_\_\_ Bed Utilization is more than 65% and less than 105% (local target is 90%)

\_\_\_\_\_ Bed Utilization is under 65%: I have verified that clients have been properly entered and exited and verify that the bed utilization is under 65%. Justification for low utilization:

\*\*Justification for high utilization:

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\_\_\_\_\_ Bed Utilization is over 100%: I have verified that clients have been properly entered and exited and verify that the bed utilization is over 105%.

\*\*Justification for high utilization:

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**Last Service Date (Required for Outreach and Supportive Services programs only)**

Clients who have not received services within the last 90 days: \_\_\_\_ have or \_\_\_\_ have not been exited from their programs. Please provide an explanation if they have not:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

**Street Outreach Program Certification**  
**Bed Utilization and Data Quality**

[Agency and Program Name]

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Data Certification for \_\_\_\_\_ Quarter of \_\_\_\_\_

Months: \_\_\_\_\_

I have reviewed the data for the period beginning on the first day of the month to the last day of the month. I have compared the aggregate data reports to the detail and result reports and have made a good faith effort to correct deficiencies in the client data shown on the reports. I have reviewed the following (as applicable to my program) and understand that the CoC's goal is 100% for all Universal data elements (unless otherwise stated in the Data Quality Plan) and must provide an explanation for data elements that are below the benchmark:

**Universal Data Elements**

My agency's data quality: \_\_\_ does or \_\_\_ does not meet the CoC's 60% + data completeness standard. If it does not, provide justification:

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**Program Specific Data Elements**

Percentage for entry questions are: \_\_\_ less than 60% or \_\_\_ 60% or more. Justification for less than 60% missing answers:

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Percentage for exit questions are: \_\_\_ less than 60% or \_\_\_ 60% or more. Justification for less than 60% missing answers:

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**Last Service Date (Required for Outreach and Supportive Services programs only)**

Clients who have not received services within the last 90 days: \_\_\_ have or \_\_\_ have not been exited from their programs. Please provide an explanation if they have not:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_