





Alaska Homeless Management Information System (AKHMIS)

Data Quality Plan

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IMPORTANT ACRONYMS

ACEH: Anchorage Coalition to End Homelessness

AK: Alaska

AKCH2: Alaska Coalition on Housing and Homelessness

AKHMIS: Alaska Homeless Management Information System

AMHTA: Alaska Mental Health Trust Authority

CoC: Continuum of Care **DQP**: Data Quality Plan

DQIP: Data Quality Improvement Plan

ESG: Emergency Solutions Grant

HHS: Department of Health and Human Services

HIC: Housing Inventory Count

HMIS: Homeless Management Information System

HUD: Department of Housing and Urban Development

ICA: Institute for Community Alliances

LSA: Longitudinal System Analysis

PDDEs: Project Descriptor Data Elements

PII: Personally Identifying Information

PIT: Point in Time Count

PSDEs: Program Specific Data Elements

SPMs: System Performance Measures

UDEs: Universal Data Elements

VA: Department of Veterans Affairs

1 INTRODUCTION

1.1 BACKGROUND

The HMIS Data Standards have been jointly established by the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services (HHS), and the U.S. Department of Veterans Affairs (VA) to allow for standardized data collection on individuals and families experiencing homelessness and receiving assistance from programs funded by these federal partners.

A Homeless Management Information System (HMIS) is the information system designated by a local Continuum of Care (CoC) to comply with the requirements of CoC Program interim rule 24 CFR 578. It is a locally-administered data system used to record and analyze client, service, and housing data for individuals and families who are homeless or at risk of homelessness.

HMIS is administered by the U.S. Department of Housing and Urban Development (HUD) through the Office of Special Needs Assistance Programs (SNAPS) as its comprehensive data response to the congressional mandate to report annually on national homelessness. It is used by all projects that target services to persons experiencing homelessness within SNAPS and the office of HIV-AIDS Housing. It is also used by other Federal Partners from the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Veterans Affairs and their respective programs to measure project performance and participate in benchmarking of the national effort to end homelessness. From the FY 2020 HMIS Data Standards

In August of 2019, HUD published the FY 2020 HMIS Data Standards and the FY 2020 HMIS Data Standards Data Dictionary, the current HMIS Data Standards at the time of this document's creation. These FY 2020 HMIS Data Standards went into effect October 1, 2019, and remain in effect unless and until updated.

All projects and programs entering data into HMIS, regardless of funding source, are required to provide data consistent with these standards.

1.2 WHAT IS DATA QUALITY AND WHY DOES IT MATTER?

Data quality is the extent to which the information contained in HMIS accurately represents the real-world clients and situations it is meant to describe.

High quality data within HMIS is integral to all work towards ending homelessness because it:

- Provides a clearer understanding of homelessness within the community, which:
 - Allows for data-informed decisions at both the project- and system-levels;
 - Enables a CoC, and projects within a CoC, to tell the story of homelessness as realistically and completely
 as possible for use in advocacy and community education;
- Provides direct care staff with immediate access to important client information that can streamline daily activities and may result in improved service delivery and prompt referrals for clients;
- May directly affect clients through the Coordinated Entry process and may determine which services they may or may not appear to be eligible for;
- Results in more accurate and complete reports for funders and stakeholders, which can affect:
 - Meeting the requirements for CoC and other federal funding streams;
 - o The funding opportunities providers apply for; and

 A provider's ability to obtain funding to provide needed services to individuals at risk of and/or experiencing homelessness.

1.3 WHAT IS AN HMIS DATA QUALITY PLAN?

An HMIS Data Quality Plan is a system-wide document that supports a CoC to achieve statistically valid and reliable data in their local HMIS. The plan intends to accomplish the following:

- Identify the **responsibilities** of all parties within the CoC with respect to HMIS data quality;
- Establish specific data quality standards for timeliness, completeness, accuracy, and consistency;
- Describe the **procedures for implementing the plan and monitoring** progress toward meeting data quality standards, including:
 - o Defining how improvement opportunities in data quality are addressed; and
 - Establishing timelines for monitoring data quality on a regular basis.

2 THE AKHMIS DATA QUALITY PLAN

2.1 PURPOSE

The AKHMIS Data Quality Plan has been developed to provide actionable, measurable steps to address data quality within the Alaska Homeless Management Information System (AKHMIS), which includes both HUD-defined AK CoCs: Anchorage (AK-500) and Balance of State (AK-501).

2.2 OVERVIEW

The AKHMIS Data Quality Plan begins by identifying the data entered into AKHMIS, and then explains the quality standards and goals set forth by the AK CoCs for these data. The plan addresses the various components of data quality – completeness, timeliness, accuracy, consistency, coverage, and utilization – and provides the standards (minimum requirements) that AKHMIS-participating organizations entering data into AKHMIS must meet. Finally, the plan provides how data quality will be monitored and how the AK CoCs will incentivize and enforce these standards. Attachments to this plan include an <u>AKHMIS Monitoring Tool</u> for project monitoring, and an outline of a <u>Data Quality Improvement Plan</u> for use in situations where an organization's data quality consistently has room for improvement and the organization requires extra assistance to meet data quality standards.

2.3 PARTICIPATION

All federally funded homeless services projects are required to use AKHMIS and must meet certain data quality expectations to ensure accurate reporting for those grants. However, as all providers that enter data into the AKHMIS contribute to the overall picture of homelessness within the state of Alaska, all providers will be expected to participate in this AKHMIS Data Quality Plan, regardless of funding source.

2.4 ROLES AND RESPONSIBILITIES

The AKHMIS Data Quality Plan sets expectations for the AK CoCs, the Institute for Community Alliances (ICA) as the HMIS Lead, participating organizations, and end users to ensure valid and reliable data is captured on all persons accessing homelessness services in the state of Alaska. The Roles and Responsibilities of each party are outlined in the AKHMIS Governance Documents. Hyper link will be added once the document is approved

The AK CoCs work will with ICA to ensure all projects have access to the tools they need to achieve high data quality. This includes training and data quality reports for monitoring, as well as incentives to maintain a high level of data quality and

accountability for non-responsiveness to data quality concerns. ICA will be responsible for a majority of monitoring by providing data quality reports on within the Data Quality Plan, and the AK CoCs are charged with ensuring organizations respond to and act upon data quality concerns appropriately to ensure that the overall data quality within AKHMIS is acknowledged and improved in an ongoing, objective, and data-driven manner. The AK CoCs will work with ICA to ensure that targeted assistance is provided by ICA and data corrections are carried out by the organization and/or end user in a timely manner

2.5 DATA QUALITY AGREEMENT

All organizations participating in AKHMIS will be required to sign an AKHMIS Data Quality Plan - Organization Agreement for access to AKHMIS. This Agreement will require the organization to participate in and abide by the processes and standards provided within this document. Add hyper link once the document is approved

This AKHMIS Data Quality Plan is a living, evolving tool that will change as the community and its AKHMIS data needs change. Most changes will be discussed with the end users prior to being implemented to secure organization buy-in. As changes are made, providers will need to sign an updated Agreement.

3 AKHMIS DATA

3.1 UNIVERSAL DATA ELEMENTS

3.1.1 PURPOSE/IMPORTANCE

The Universal Data Elements (UDEs), as defined and mandated for collection by HUD, establish the minimum data collection requirements for all homeless housing and/or service projects entering data into AKHMIS, regardless of funding source.

These elements collect information on the basic demographics of the population being served, including personally identifying information (PII), and therefore are critical to an AKHMIS's ability to produce unduplicated estimates of the number of people at-risk of or currently experiencing homelessness. Additionally, these elements provide information about access and use of homeless assistance projects, including patterns of service use, information on shelter stays, and episodes of homelessness over time.

3.1.2 COLLECTION

All projects participating in AKHMIS are required to collect the UDEs, regardless of funding source. The Personally Identifying Information (PII) UDEs (3.01 through 3.07) must be collected once per client, regardless of how many project stays that client has in the system. The remaining UDEs (3.08 through 3.917) are to be collected at least once per project stay.

Personally Identifying Information

- 3.01 Name
- 3.02 Social Security Number
- 3.03 Date of Birth
- 3.04 Race
- 3.05 Ethnicity
- 3.06 Gender
- 3.07 Veteran Status

Demographic & Project Access Information

- 3.08 Disabling Condition
- 3.10 Project Start Date
- 3.11 Project Exit Date
- 3.12 Destination
- 3.15 Relationship to Head of Household
- 3.16 Client Location
- 3.20 Housing Move-In Date (PH only)
- 3.917 Prior Living Situation

3.2 ALASKA SPECIFIC DATA ELEMENTS

3.2.1 PURPOSE

The Alaska Specific Data Elements, as designed by the AK CoCs, collect information that is important to Alaska-specific organizations that address and provide funding for Alaska-specific issues. The data elements were created to provide for the data collection necessary to fulfill the reporting requirements of these Alaska-specific programs, to ensure that homeless services organizations can continue to secure this funding. All new Alaska Specific Data Elements must be approved by the AK CoCs and AKHMIS Advisory Board.

3.2.2 COLLECTION

Regardless of the funding source, all projects participating in AKHMIS are required to collect the Alaska Specific Data Elements. These data elements should be collected upon client entry into a project and then updated as necessary to accurately reflect changes in a client's situation.

Alzheimer's Disease and Related Dementias Alaska Mental Chronic Alcoholism or other Substance Use Disorder Health Trust Intellectual or Developmental Disabilities Authority (AMHTA) Mental Illness Specific Disabilities Traumatic Brain Injuries Ahtna Corp **Aleut Corp Bering Straits Native Corp** Arctic Slope Regional Corp Alaska Native **Bristol Bay Native Corp** Calista Corp Regional Chugach Alaska Corp Cook Inlet Regional Corp Corporations **Doyon Limited Corp** Koniag Inc 13th Regional Corp

3.3 PROGRAM SPECIFIC DATA ELEMENTS

3.3.1 PURPOSE

The Program Specific Data Elements (PSDEs) have been designed by HUD to allow projects that receive funding from any HMIS Federal partner, such as the U.S. Department of Health and Human Services (HHS) or the U.S. Department of Veterans Affairs (VA) to meet the statutory and regulatory data collection and reporting requirements of these programs. AKHMIS is required to provide for the collection of these data elements in support of these projects,

PDSEs, as defined by HUD, provide additional information about the characteristics of clients, the services they are provided, and program outcomes. Many of these data elements represent repeated transactions and were designed to collect information that may change over time.

3.3.2 COLLECTION

PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence. Not all PDSEs are required for collection by all projects, and some AKHMIS-participating projects may only collect the UDEs and not collect any PSDEs at all. The https://hub.exchange-federal Partners landing-page serves as a gateway to the manuals that provide the specific PDSE data collection requirements per program and HMIS project type.

AKHMIS-participating organizations are encouraged to actively work with ICA to ensure that they collect the information required by their funders at all appropriate event occurrences.

The table below provides the "Common Program Specific Data Elements", which are the PSDEs that are collected across most Federal Partner programs. These Common PDSEs are listed along with their collection point within a client's project stay:

	Collection Point				
Common PSDE	Project Start	Occurrence	Update	Annual Assessment	Project Exit
4.02 Income and Sources	Х		Х	Х	Х
4.03 Non-Cash Benefits	Х		Х	X	Х
4.04 Health Insurance	Х		Х	Х	Х
4.05 Physical Disability	Х		Х		Х

	Collection Point				
Common PSDE	Project Start	Occurrence	Update	Annual Assessment	Project Exit
4.06 Developmental Disability	Х		Х		Х
4.07 Chronic Health Condition	Х		Х		Х
4.08 HIV/AIDS	Х		Х		Х
4.09 Mental Health Problem	X		Х		Х
4.10 Substance Abuse	Х		Х		Х
4.11 Domestic Violence	Х		Х		
4.12 Current Living Situation		Х			
4.13 Date of Engagement		Х			
4.14 Bed-Night Date		Х			
4.19 Coordinated Entry Assessment		Х			
4.20 Coordinated Entry Event		Х			

3.4 PROJECT DESCRIPTOR DATA ELEMENTS

3.4.1 PURPOSE

The Project Descriptor Data Elements (PDDEs), as defined by HUD, contain basic information about the projects participating in AKHMIS and help ensure AKHMIS is a consistent and comprehensive database of information about homelessness. The PDDEs are the 'building blocks of AKHMIS. They enable AKHMIS to:

- Associate client-level records with the various projects in which clients will enroll in across project types;
- Identify which federal partner programs are providing funding to the project; and
- Record bed and unit inventory and other information, by project, which is relevant for the Longitudinal System Analysis (LSA), System Performance Measures (SPMs), Housing Inventory Counts (HIC), Point In Time (PIT) counts, and bed utilization reporting.

3.4.2 COLLECTION

PDDEs are entered and managed by ICA in collaboration with each AKHMIS-participating organization, not AKHMIS end users. They are created at initial project setup within AKHMIS, and AKHMIS-participating organizations must work closely with ICA to review these at least once annually, including to provide updated information about their projects within 15 days after the start of a new federal fiscal year.

The required PDDEs are the following, with each comprised of multiple sub-elements of project information:



4 DEFINING DATA QUALITY

4.1 FOUR COMPONENTS OF DATA QUALITY

HUD identifies data quality as having four components: completeness, timeliness, accuracy, and consistency. These components are defined below, and further described later in this document.

Completeness	All clients entered Complete identifying data entered Complete characteristics fields entered All services entered Complete exit data entered
Timeliness	Data are entered soon after collected Changing data are kept up to date
Accuracy	Truthfulness from clients Accurate data entered by staff
Consistency	Common interpretation of questions Common interpretation of client answers Common knowledge of what fields to answer

4.2 USAGE OF CLIENT REFUSED AND CLIENT DOESN'T KNOW RESPONSE OPTIONS

Most required HMIS data elements provide for the options of "Client doesn't know" or "Client refused" to be recorded for the client's response. These options are considered poor data quality but are provided to allow a response to be recorded for required elements within an assessment when these situations do occur, so a client may still be provided assistance. These are never to be used in place of asking a client for information, or in a situation where information was not collected. As described by the FY 2020 HMIS Data Standards:

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 should not be used to indicate that the case manager or data entry person does not know the client's response. Nor are these responses to be assumed without first asking the client to provide the information. Some clients may decline to provide responses to some fields but case managers or data entry staff may not make that decision for them. At a national level, in every project type, a majority of clients are willing to provide identifying information. If a project is experiencing a high rate of client refusals as compared to similar projects, CoCs should consider implementing trainings around interviewing or trust-building techniques to support client engagement. A deeper engagement with clients may lead to more rapid movement off the street and placement in housing, consistent with meeting federal goals to end homelessness and improvement on HUD's System Performance Measures.

4.3 MISSING DATA RESPONSES

"Missing data" is a category that represents all invalid and null responses to a required data element in AKHMIS. As described by the FY 2020 HMIS Data Standards:

The HMIS Data Standards assume that fields for which data are not collected will be left blank (i.e., 'missing'). In situations where a system requires a response to all data fields before saving a record, the system must use a specific response category to indicate that data were not collected.... "Data not collected" continues to be identified as a response option in these HMIS Data Standards. It is not a response option necessary in every system or in every element. The element is required for use by any HMIS system which requires a response to an element before allowing the user to move forward in the system. Adding the response option of "data not collected" enables a user who did not collect or simply does not have the information to enter a response that does not present a false answer. HMIS systems which require entry of any element for the system to progress must implement the "data not collected" response for all elements that require a response. "Data not collected" must equate to missing data or null values as appropriate for transfer and reporting purposes.

5 AKHMIS PROJECT DATA QUALITY STANDARDS

5.1 PURPOSE

The following data quality standards are the minimal standards to be met by all organizations entering data into AKHMIS. When data quality standards are met, reporting is more reliable and can be used to evaluate service delivery, project design and effectiveness, and efficiency of the system.

5.2 COMPLETENESS

"Are all of the required data elements for clients served recorded in AKHMIS?"

5.2.1 **DEFINITION**

Data Completeness is the percentage of data fields for any given client, project enrollment, provider, organization, or system that are filled in or answered. The definition used in the <u>CoC Data Quality Brief</u> is: "The degree to which all required data is known and documented."

Incomplete or missing data always consists of null and "data not collected" values, and may include "client doesn't know", "client refused", and/or "other" values for some data elements.

5.2.2 IMPORTANCE

Complete data is critical to finding the right services for clients to end their homelessness experience. Incomplete data can negatively impact the AK CoCs' ability to make population-level assessments, analyze patterns in client information, identify changes within the homeless population, and adapt strategies appropriately. AKHMIS data quality is also part of funding applications, including CoC- and ESG-funding, and low AKHMIS data quality scores may impact renewal funding or future funding requests.

5.2.3 STANDARDS/MINIMUM REQUIREMENTS

Data completeness is evaluated for the past 12 months to ensure organizations are completing records to the best of their ability, including updating records and entering in additional information that is gained as client interactions take place. The AK CoCs encourage all AKHMIS-participating organizations to aspire to 100% collection of all data elements (Universal, Alaskan, and Program Specific), but recognize that 100% data completeness may not be realistic or possible in all cases.

Ultimately, the encouragement to take ownership of quality data is organization-driven, Therefore, the AK CoCs have created minimum requirements for the past 12 months of project data completeness based on HMIS project type to accommodate all situations and ensure all HUD requirements are met, provided in the table below:

HMIS Project Type	Completeness Standard (% of Required Data Entered in AKHMIS)
Coordinated Entry	95% of required data elements (only applies after client reaches a specific point in the Coordinated Entry process)
Emergency Shelter	95% of required data elements, 25% of required destination data
Homelessness Prevention	95% of required data elements
Permanent Supportive Housing	98% of required data elements
Rapid Rehousing	98% of required data elements
Street Outreach (Clients with a Date of Engagement only)	90% of required data elements (only applies after client has a Date of Engagement)
Supportive Services Only (Excludes Coordinated Entry)	95% of required data elements
Transitional Housing	95% of required data elements

5.3 TIMELINESS

"Is the required client information entered into AKHMIS within the required period of time?"

5.3.1 DEFINITION

Data timeliness is the length of time between when AKHMIS information is collected and when that information is entered into AKHMIS. Data timeliness cannot be edited and can only be improved going forward.

5.3.2 IMPORTANCE

Entering data into AKHMIS in a timely manner is necessary to ensure that clients receive or make connections to the services they need in a quick and efficient manner. Timely data entry also ensures that data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Finally, 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.

5.3.3 STANDARDS/MINIMUM REQUIREMENTS

The AK CoCs encourage all AKHMIS-participating organizations to aspire to 100% of data being entered into AKHMIS in a timely manner. However, the AK CoCs recognize that this may not be realistic or even possible in all cases, and therefore have created the following minimum requirements for data timeliness based on AKHMIS project type:

HMIS Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in AKHMIS)
	Entry	Live time or within 5 days of contact
Coordinated Entry	Exit	Live time or within 5 days of contact (back-dated to date of last contact)
Homelessness Prevention	Entry, Exit	Live time or within 5 days of contact
Farance Chalker Hallician and an	Entry	Live time or within 5 days of shelter stay
Emergency Shelter - Utilizing only an entry/exit workflow	Exit	Live time or within 5 days of project exit (back-dated to date of last shelter night stay, the morning of the day the client did not return)
Emergency Shelter - Utilizing shelter	Entry	Live time or within 5 days of shelter stay
stay connected to an entry/exit workflow	Exit	Live time or within 5 days of project exit (back-dated to date of last shelter night stay, the morning of the day the client did not return)
	Shelter Stay	Live time or within 5 days of departure (back-dated to date of last shelter stay, the morning of the day the client did not return)
Francisco Chaltan Httl:-ing chaltan	Entry	Live time or within 5 days of the client's first shelter night stay
Emergency Shelter - Utilizing shelter stay disconnected from an entry/exit workflow	Exit (formal project exit)	Live time or within 5 days of project exit
	Auto-Exit (no- contact exit)	After 14 days without a shelter stay, project exit needs to be recorded within 5 days (back-dated to date of last shelter night stay, the morning of the day the client did not return)
Permanent Supportive Housing	Entry, Exit	Live time or within 5 days of contact
Rapid Rehousing	Entry, Exit	Live time or within 5 days of contact
	Contacts, Entry	Live time or within 24 hours of contact
Street Outreach	Exit (formal project exit)	Live time or within 24 hours of project exit
	Auto-Exit (no- contact exit)	After 90 days of no contact, project exit needs to be recorded within 5 days (back-dated to date of last contact)

HMIS Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in AKHMIS)
Supportive Services Only (excludes Coordinated Entry)	Entry, Exit	Live time or within 5 days of contact
Transitional Housing	Entry, Exit	Live time or within 5 days of contact

5.4 ACCURACY

"Does AKHMIS data accurately reflect true client information?" and "Are all of my clients in AKHMIS/In the correct project?"

5.4.1 DEFINITION/IMPORTANCE

Information entered in AKHMIS needs to accurately represent the clients who are served by any homeless service projects contributing data to AKHMIS. Inaccurate data, sometimes referred to as incongruent data, is evaluated at both the client and household levels, and highlights data elements that appear to rationally conflict with one or more other data elements.

Data accuracy is not easy to manage or monitor and requires specific reports that look at congruency between and among responses to data elements within the system, as well as checks between what the client has told an intake worker and what data is entered into AKHMIS. Additionally, the Longitudinal System Analysis looks at specific data quality measures in a community-wide report submission to HUD on an annual basis.

The AK CoCs, in partnership with ICA, work with projects to review, at regular intervals, the data collected directly from clients, and the data entered into AKHMIS to ensure that the data entered into AKHMIS matches the client's reality.

5.4.2 STANDARDS

External Record Standard: It is expected that 100% of client paper form data must match the client's AKHMIS data record, but a minimum of 98% is acceptable.

Quarterly Correction Standard: Due to the complexity of data accuracy, specific standards have not been developed. Some amount of data incongruity may be reasonable depending on a client's or a household's situation; however, providers should strive to minimize data incongruity that occurs without explanation to help ensure the data reported by the AKHMIS is accurately reflecting the state of homelessness in Alaska.

Instead, timely corrections/updates to the following data elements, if and as necessary, are expected of all project types and all data entered into AKHMIS on a quarterly basis (as per the usual monitoring process):

UDE Accuracy Measure	Data Element(s) Involved	Accuracy Test	
Date of Birth <>	3.03 Date of Birth	3.03 is not the same date as 3.10 for Heads of	
Project Start Date	3.10 Project Start Date	Household	
Household Error	3.15 Relationship to Head of Household	At least one, and only one, Head of Household per household (no HoH is an error, multiple HoH is an error)	

UDE Accuracy Measure	Data Element(s) Involved	Accuracy Test
		No infant or young child Heads of Household (under X years of age)
	3.917 Prior Living Situation	
	Length of time in previous place	
Prior Living Situation and	Approximate date homelessness started	Dependencies (Approx. Date, Time, and Months)
Dependencies are Congruent	Number of times experiencing homelessness in the last three years	answered if 3.917/Length of Time indicate the client came from a homelessness situation
	Number of months experiencing homelessness in the last three years	
	3.08 Disabling Condition	If Yes to 3.08, then Yes to at least one 4.## and Yes to corresponding Disabling? dependency
	4.05 Physical Disability	
Disabling Condition has a	4.06 Developmental Disability	
Source	4.07 Chronic Health Condition	If Yes to <i>Disabling? Dependency for any 4.##,</i> then Yes
	4.08 HIV/AIDS	to the corresponding 4.##
	4.09 Mental Health Problem	
	4.10 Substance Abuse	
Monthly Income has a	4.02 Income	If Yes to 4.02, then Yes to at least one source
Source	Sources	If a Source is selected, then 4.02 must be Yes
Non-Cash Benefits has a	4.03 Non-Cash Benefits	If Yes to 4.03, then Yes to at least one source
Source	Sources	If a Source is selected, then to 4.03 must be Yes
Hoolth Incurance has a Time	4.04 Health Insurance	If Yes to 4.04, then Yes to at least one Source
Health Insurance has a Type	Types	If a <i>Type</i> is selected, 4.04 must be Yes
Domestic Violence and	4.11 Domestic Violence	If Yes to 4.11, dependencies (When and Fleeing) are answered; if No to 4.11, dependencies are not answered
Dependencies are congruent	When experience occurred	If answered, 4.11 is Yes and other dependency is
congruent	Are you currently fleeing	answered
Makayana aya Nat Adin	3.07 Veteran Status	2.07 is not Voc for alicents under 19
Veterans are Not Minors	3.03 Date of Birth	3.07 is not Yes for clients under 18 years of age
	3.16 Client Location	
Client Location is Appropriate to Project	2.02 Project Information	3.16 for a client enrollment matches 2.03 for the project
	2.03 Continuum of Care Information	

UDE Accuracy Measure	Data Element(s) Involved	Accuracy Test	
	2.02 Project Information	Specific to a Project – examples include: Age (Minor-	
Project funding sources	2.06 Funding Sources	/Youth-/Adult-only); Household (Singles-/Families-only Gender (Single-Gender)	
match clients	Clients in project	Veteran (Veteran-dedicated); Disabling Condition Required	
Housing Move-In Date is	3.20 Housing Move-In Date	Ensure the 2.20 does not produte 2.10	
Accurate	3.10 Project Start Date	Ensure the 3.20 does not predate 3.10	

5.5 CONSISTENCY

"Are the required data elements being recorded in AKHMIS in a consistent manner across projects?"

5.5.1 DEFINITION/IMPORTANCE

Data consistency means that data is understood, collected, and entered in the same way across all projects in AKHMIS. Consistency directly affects the accuracy of data.

5.5.2 STANDARDS

Initial User Training Standard: All data entry workers must complete an initial training before they will be allowed to access the live AKHMIS. Additional training opportunities beyond initial training are available and readily offered by ICA.

Training is also offered for intake workers who do not do data entry, to ensure they understand the purpose and importance of the information they are collection.

Monthly Activity User Standard: Users must log into AKHMIS and enter data at least once every 45 days to maintain active user status. Users must enter data on a regular and consistent basis to maintain AKHMIS access to prevent a backlog of data entry and to ensure they maintain familiarity with AKHMIS and the workflows for which they are responsible.

User Employment Standard: ICA must be notified by an organization within 24 hours of any existing AKHMIS user no longer being employed at the organization.

6 AKHMIS SYSTEM-WIDE DATA QUALITY STANDARDS

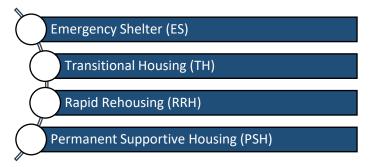
6.1 BED COVERAGE

"To what degree are the beds dedicated to serving clients at-risk of and experiencing homelessness entered into AKHMIS?"

6.1.1 DEFINITION

AKHMIS bed coverage is the number of homelessness services program beds in the AK CoC's geographic area that contribute data to AKHMIS.

The following HMIS Project Types contribute to bed coverage:



6.1.2 IMPORTANCE

The importance of a high percentage of AKHMIS Bed Coverage for all project types is an emphasis of the <u>HUD TA Data Strategy</u>, as a lack of AKHMIS bed coverage prevents AK CoCs from truly understanding how both their system and the clients served within their system are functioning.

6.1.3 STANDARDS

85% Coverage of Lodging Projects Standard: The AK CoCs will ensure that bed coverage is as close to 100% as is possible for applicable project types, and the AK CoCs will focus on project types with less than 85% bed coverage for improvement efforts.

6.2 BED UTILIZATION

"To what degree are the beds in AKHMIS occupied by clients?"

6.2.1 DEFINITION/IMPORTANCE

Utilization is the number of beds that are filled by a client within a given period of time. Bed and unit utilization analysis is a good way to determine whether the data in AKHMIS is accurate for the clients served in the project at any given point and if there is a possible deficiency in exiting clients from the project in a timely manner (over-utilization) or entering clients into the project in a timely manner (under-utilization).

6.2.2 STANDARDS

Between 85% and 110% Utilization Standard: Organizations are expected to have an 85-110% bed utilization rate for all lodging projects types.

6.3 HOMELESS RESPONSE SYSTEM COVERAGE

"Are all of the clients we serve entered into AKHMIS?"

6.3.1 DEFINITION

The homeless response system includes other types of projects that provide homelessness services but do not provide lodging to clients. If any service project types are dedicated and/or prioritized to serve clients at-risk of or experiencing homelessness in the community, the goal is for the data to be entered into AKHMIS for clients served.

The following types of projects that do not have beds/units associated:



6.3.2 IMPORTANCE

A high percentage of AKHMIS Homeless Response System Coverage is imperative for the community to understand the various ways in which a client is entering the homeless response system beyond projects that provide beds/lodging for clients.

6.3.3 STANDARDS

System Coverage Standard: The AK CoCs will work to ensure that system coverage is as close to 100% as possible for all project types.

7 MONITORING

7.1 PURPOSE

Ongoing AKHMIS data quality monitoring will be conducted to the goal of ensuring organizations maintain a high level of data quality at all times with a minimal amount of data clean-up. Data quality issues that are the result of problems with a data entry process will be noticed more quickly with regular monitoring, which means corrections to processes can be implemented earlier to minimize the amount of corrections that will be necessary. Additionally, it can be easier to make corrections to more recent records where a client is still available and/or before a problem is compounded by information added at a later date.

7.2 GENERAL PROCESS

Data are evaluated for the past 12 months to ensure organizations are completing records to the best of their ability, including updating records and entering in additional information that is gained as client interactions take place. AKHMIS data will be monitored regularly at the user-, project-, organization-, and system-levels to ensure that the above standards are met by all AKHMIS-participating organizations. A current copy of this AKHMIS Data Quality Plan will be posted to ICA's website to ensure that AKHMIS-participating organizations are aware of the minimum data entry standards they are required to meet.

The AK CoCs will work with ICA to monitor data quality. AKHMIS-participating organizations will receive reports from ICA regarding their AKHMIS data quality, as well as specific information regarding the nature of any inaccuracies and the methods by which to correct them. ICA and the struggling organization and/or end user will work together to develop a plan and timeline to strive towards improvement.

Organizations that consistently do not meet the minimum data entry standards set forth herein will be asked by the AK CoC to work with them and ICA to improve and meet the standards moving forward (for further information see 8.3 <u>Data Quality Improvement Plan</u>).

7.3 COMPLETENESS MONITORING

ICA runs Data Completeness reports on the previous 12 months of project data on a quarterly basis and sends these reports to each AKHMIS-participating organization. AK CoCs will receive a summary report of this information.

Organizations with projects that fall below the standards for data completeness for that project type are asked to clean up their data within one month, but this timeframe may be changed to accommodate individual situations upon approval by the AK CoC.

For persistent data completeness issues, projects may be contacted by the AK CoC to discuss the implementation of a Data Quality Improvement Plan (DQIP) (see 8.3 Data Quality Improvement Plan).

7.4 TIMELINESS MONITORING

ICA runs Data Timeliness reports for the previous 12 months of data entry on a quarterly basis and sends these reports to each AKHMIS-participating organization.

Organizations with projects that fall below the standards for data timeliness for that project type are asked to work with ICA to make sure that they can meet the Data Timeliness standard moving forward.

For persistent data timeliness issues, projects may be contacted by the AK CoC to discuss the implementation of a Data Quality Improvement Plan (DQIP) (see 8.3 <u>Data Quality Improvement Plan</u>).

7.5 ACCURACY MONITORING

ICA runs Data Accuracy reports on the previous 12 months of data entry on a quarterly basis and sends these reports to each AKHMIS-participating organization. AK CoCs will also receive a summary report of this information.

The AK CoCs, in partnership with ICA, work with projects to review, at regular intervals, the data collected directly from clients, and the data entered into AKHMIS to ensure that the data entered into AKHMIS matches the client's reality. This is done, at a minimum, during annual monitoring, and may also occur at other points throughout the year.

Organizations with projects that show improvement opportunities with data accuracy are asked to clean up their data within one month, but this timeframe may be changed to accommodate individual situations upon approval by the AK CoC.

For persistent data accuracy concerns, projects may be contacted by the AK CoC to discuss the implementation of a Data Quality Improvement Plan (DQIP) (see 8.3 Data Quality Improvement Plan).

7.6 CONSISTENCY MONITORING

ICA will run regular reports on AKHMIS User activity to monitor existing users at least quarterly to show when users last logged into the system. ICA will provide a list to each organization of all users who have access to AKHMIS at least quarterly and the organization's data contact will notify ICA if any user on this list no longer requires access to AKHMIS.

7.7 SYSTEM-WIDE MONITORING

7.7.1 BED COVERAGE & SYSTEM COVERAGE

The AK CoCs will review and update the AK CoCs' most recent Housing Inventory Chart (HIC) to know which projects participated in the most recent HIC but are not entering data into AKHMIS (excluding Victim Services Projects) on a quarterly or semi-annual basis.

Ensuring an AK CoC's AKHMIS Coverage reaches 100%, and stays at 100%, requires implementing a process to ensure that any new projects that become available to serve clients at-risk of or experiencing homelessness are communicated to the AK CoC so that AKHMIS data entry is encouraged and/or required for the new project.

The AK CoCs will work with the strategies below with the goal of increasing AKHMIS Bed and Response System coverage to 100%:

Strategies to Increase and/or Maintain HMIS Bed Coverage

The AK CoC ensures that all new projects that become available within the AK CoC that serve clients at-risk of or experiencing homelessness, are encouraged, and/or required to enter data into AKHMIS.

Provide a streamlined, simple process for new organizations and/or projects to communicate to the AK CoC about new projects operating within the community.

Work with state and local funders to understand the importance of AKHMIS and encourage all funders to require the use of AKHMIS for grantees.

7.7.2 BED UTILIZATION

ICA will regularly calculate and review bed utilization data. Organizations with a project with utilization under 85% or over 110% will be contacted by ICA for more information to verify that this utilization is accurate for the time period, which will be shared with the relevant AK CoC.

If the utilization is not correct, the organization will work with ICA to ensure that all clients who were served in the time period are entered into the project (remedying under-utilization) and that all clients who were exited in the time period are exited from the project (remedying over-utilization).

ICA will also review bed utilization regularly with the AK CoCs.

8 DATA QUALITY IMPROVEMENT

The AK CoC will work with ICA to ensure AKHMIS-participating organizations have access to all the support and tools they need to achieve a high level of data quality within AKHMIS. The following processes are designed to demonstrate to organizations the importance of data quality within AKHMIS and encourage its prioritization within their daily functions.

8.1 INCENTIVES

Organizations that consistently make timely corrections to their data will minimize their workload going forward. Additionally, they will improve their funding outlook with complete and accurate data to provide to possible funders to prove their need.

AKHMIS-participating organizations who consistently achieve high levels of data quality, and those who make significant improvements, are publicly acknowledged at least every quarter.

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AK CoC Board	The AK CoC Boards make data quality a standing agenda item at Board meetings, and publicly acknowledge projects meeting a high level of data quality.
AK CoC General Membership	The AK CoCs acknowledge the work of projects meeting a high level of data quality and/or making improvements to data quality at the AK CoCs' General Membership Meetings, via the AK CoC enewsletter, and/or other public forums.
AK CoC Rank & Review Process	The AK CoCs use data quality metrics to evaluate projects during the rank and review process

8.2 CONTINUOUS DATA QUALITY IMPROVEMENT PROCESS

An AKHMIS-participating organization with an identified data quality improvement opportunity is permitted a minimum of one month to correct their data or processes. The AK CoCs and ICA may offer additional support and/or training to the AKHMIS participating organization until such a time as the organization effectively demonstrates an ability to meet with minimum data entry standards. Determination of ability is at the discretion of the AK CoC.

8.3 DATA QUALITY IMPROVEMENT PLAN

A Data Quality Improvement Plan (DQIP) is a detailed work plan intended to support and enhance an organization's data quality in a specific area.

A DQIP is a collaborative effort between the organization, the AK CoC, and ICA, with AK CoC and ICA providing support to the organization with appropriate resources and training to ensure the goals and objectives in the DQIP are successfully achieved. A DQIP also requires ongoing communication with the AK CoC, including AK CoC notification before any DQIP is initiated and information on progress toward goals and objectives.

8.3.1 INITIATION

A DQIP may be advised when an annual monitoring visit or quarterly data quality reports document one or more ongoing improvement opportunities related to data quality within a given organization (i.e., ongoing is defined as the improvement opportunity lasting longer than a specific period of time as defined by the AK CoC and ICA without resolution).

8.3.2 COMPONENTS

An effective Quality Improvement Plan includes a description of the following elements:

Improvement Objectives

Measurable goals

Activities (to meet objectives and goals)

- •Training and support activities that need to be developed or improved
- •Timeline for all activities, including DQIP start and end dates
- Responsible parties
- Assessment/measurement methods for progress

Monitoring Plan

- Monitoring activities
- Monitoring benchmarks/dates

Communication Plan

- •Communication of DQIP activities to the organization's users
- Progress reports from the organization to relevant stakeholders
- Progress reports to the CoC

Evaluation Plan (to determine effectiveness)

- •A date for final evaluation
- •Thresholds for plan extension and continued monitoring or plan expiration

8.3.3 EVALUATION

Dependent upon DQIP evaluation results, the appropriate process from the options below will take place:

- 1. Organizations that meet required minimum standards will have their DQIP concluded and will return to the regular monitoring and oversight process.
- 2. Organizations that do not meet data quality standards by the end of their DQIP period, but have shown improvement, may have their DQIP extended to facilitate and ensure continued improvement. Such an extension plan will be a collaborative decision between the AK CoC, ICA and the organization.
- 3. Organizations that do not meet data quality standards by the end of their DQIP period and have not shown improvement or active engagement in their DQIP will be reported to the AK CoC for further review of the situation. The AK CoC will engage the organization and ICA in communication regarding next steps.

Organizations that continue to demonstrate a complete inability to meet minimum data quality standards and a lack of engagement may have their AKHMIS access suspended, at the discretion of the AK CoC to preserve the integrity of AKHMIS and ensure that other organizations do not suffer due to poor data quality from another organization. Suspension will be a last resort and will not occur without all other options being considered nor without extensive communication between the AK CoC, the AKHMIS Advisory Board, and the organization.

See Appendix A for a sample Data Quality Improvement Plan template.

8.4 AKHMIS ANNUAL MONITORING TOOL

The AK CoCs and ICA will use a standard AKHMIS Annual Monitoring Tool to evaluate how compliant an organization entering data into AKHMIS is with this Data Quality Plan, AKHMIS policies and procedures, organization agreements, user agreements, and any other documents governing the use of AKHMIS.

If data quality improvement opportunities are identified in any area during the evaluation, a Data Quality Improvement Plan may be created to assist the organization in addressing improvement opportunities using concrete, time-bound action steps.

8.5 NEW PROJECT MONITORING

New organizations, projects, and end users are monitored for data quality within 20 days of receiving access to AKHMIS. ICA will run data quality reports to ensure data entry is running smoothly and to find any fundamental issues with project set-up or data entry processes that are negatively impacting data quality to address them quickly. New project Monitoring results will be addressed directly with the organization, project, or end user through a webinar, review training, or other defined step. See Appendix B for AKHMIS Annual Monitoring Tool.

9 APPENDICES

- A. Data Quality Improvement Plan
- B. AKHMIS Annual Monitoring Tool

9.1 APPENDIX A: DATA QUALITY IMPROVEMENT PLAN

Period of Data Quality Improvement Plan (DQIP) Implementat	ion:	
Name of Organization:		
Organization Contact and Information:		
Name of Project(s) Included in DQIP		
Organization Staff Responsible for DQIP	Role	
Organization Staff Responsible for DQIP	Role	
Organization Staff Responsible for DQIP	Role	
ICA Staff Responsible for DQIP	Role	
ICA Staff Responsible for DQIP	Role	
AK CoC Staff Responsible for DQIP	Role	
AK CoC Staff Responsible for DQIP	Role	

Issue	Baseline Not Currently Being Met	How to Address	How Often and who is responsible	Target Date	Progress Notes	Date Completed

Additional Narrative:	dditional Narrative:		
Acknowledgement and Acceptance of Date	ta Quality Improvement Plan		
Program Manager/Organization Executive Director	 Date		
Trogram Managery Organization Exceditive Director	Dute		
ICA Manager/Director	Date		
AK CoC Manager/Director	Date		

9.2 APPENDIX B: AKHMIS ANNUAL MONITORING TOOL

1. Organization Privacy & Security Verifications

Privacy Procedural	Yes	No
The Consumer Notice is displayed in a public location and is explained to clients upon intake, and extra copies of the AKHMIS Consumer Notice, Privacy Policy, AKHMIS Policies and Procedures, and Organization Privacy and Security Policies and Procedures are available for clients.		
Clients are provided an opportunity to ask questions about the Consumer Notice.		
All AKHMIS data in hard-copy and all signed forms are stored in a secure location (protected from public/unauthorized access).		
Workstations are located in a non-public location OR monitored to prevent public/unauthorized access and screens face away from public view.		
AKHMIS user credentials (Passwords and Usernames) are not being shared between users, and not written down in plain view or saved within browser (login-required password managers are allowed).		
Data Security	Yes	No
A secure internet connection is used to access the AKHMIS.		
A firewall is installed, active, and automatically updating (or updated regularly) on each workstation computer OR on the network.		
All workstation computers have updated operating systems.		
Automatically updating antivirus software is Installed and active on all workstation computers.		
All workstation computers use an updated browser to access the AKHMIS (that is NOT Internet Explorer).		
All workstations have an automatic, password-protected screensaver that activates after 5 minutes (or less) of inactivity.		
** Unauthorized access to devices is restricted by turning off File Sharing and Network Discovery (recommendation only; not required).		
If devices are used in the field they are encrypted upon lock-out		
Compliance	Yes	No
The Organization has a Client Grievance Policy and Procedure allowing clients to submit comments regarding AKHMIS data privacy and security.		
The Organization ensures the AKHMIS is only accessed and used by persons with current, signed User Agreements with their own personal AKHMIS license.		
The Organization has a current, executed AKHMIS Participation Agreement on file with ICA and if applicable, a signed or executed Interorganizational Data Sharing and Coordinated Services Agreement		
The Organization follows Security and Privacy Policies and Procedures for AKHMIS data that are compliant with AKHMIS requirements (e.g., addressing management, handling, storage, communication, and disposal of hard-copy and/or electronic Personally Identifiable Information (PII)/Personal Protected Information (PPI)).		
The Organization regularly monitors itself for compliance with Organization and AK CoCs privacy and security policies.		
Current AKHMIS data elements are being collected.		

The Organization notifies ICA when any AKHMIS User is no longer employed at the Organization or and/or no longer needs access to the AKHMIS.		
Project Type Specific Procedures	Yes	No
Supportive Service Only Projects, including Day Shelter and Outreach Projects: Staff know and are following the Organization and AK CoC Discharge Policy		
RHY Projects: Contact Logs are being created and follow ups being recorded.		
Street Outreach Project: Outreach contacts are being recorded.		

2. Project Verifications - Replicate & complete this section for EACH project

Project Name: _	 Funding Source(s):	
-		

Inventory

Bed Type	Number of Beds
Chronically Homeless Veterans	
Youth Veterans	
Other Veterans	
Chronically Homeless Youth	
Other Youth	

Bed Type	Number of Beds
Any Other Chronically Homeless	
Non-Dedicated Beds	
Total Bed Inventory	
Total Unit Inventory	

Data Quality Check

Date Data Checked:				
✓	Standard	Yes	No	
	Are entries and contacts being recorded within the timeliness standards in the Data Quality Plan?			
	Are exits being recorded within the timeliness standards in the Data Quality Plan?			
	Project is meeting completeness standards for UDEs?			
	Project is meeting completeness standards for Destinations?			
	Project is meeting completeness standards for Prior Living Situations ?			
	Project is meeting completeness standards for AK-specific DEs?			
	Project is meeting completeness standards for PSDEs?			
	AK CoC-funded Only: Project is meeting completeness standards for Annual updates?			
	Supportive Services Only: Clients being exited/discharged appropriately?			
	Outreach Only: Contact are being recorded?			
	Is Bed and Unit Inventory current in AKHMIS?			
	Are Data Accuracy measures being updated/addressed as necessary?			
	Are all active AKHMIS users entering data on a regular basis ?			

DATA QUALITY PLAN		
Comments:		
Completed By:	Date Completed:	

DATA QUALITY CHECK