The HMIS@NCCEH Data Quality Plan

Contents

Introduction

This document describes the Homeless Management Information System (HMIS) data quality standards and the data quality monitoring plan for the CoCs for which the North Carolina Coalition to End Homelessness is the HMIS Lead. This document is developed for HMIS Participating Organizations. These HMIS@NCCEH Data Quality Standards and the related data quality monitoring plan will be updated annually, considering the latest HMIS data standards set by the U.S. Department of Housing and Urban Development (HUD). HMIS@NCCEH communities are committed to making data-driven policies for permanently housing clients and ending homelessness. High quality data is needed for system improvement and evaluation, funding and resources, and as a HUD requirement.

Development Process

A draft of the HMIS@NCCEH Data Quality Plan was developed by NCCEH Data Center with the support of ICA System Administrators. The Plan was presented to CoCs and HMIS Users for review and feedback in January and February of 2023. Final approval was passed by the NC BoS

CoC Steering Committee, the Orange CoC Leadership Team, and the Durham Policy and Planning HSAC Subcommittee in March 2023.

Applicability of HMIS Data Standards

This HMIS Data Quality Standards document applies to all HMIS participating agencies located within the Continuums of Care (CoCs) under the jurisdiction of NCCEH as their HMIS Lead Agency. No HMIS participating provider is exempt from the standards or process laid out in this document.

What is an HMIS?

An HMIS is a locally administered, electronic data collection system that stores longitudinal person-level information about the individuals who access homeless and other human services in a community. As its comprehensive data response to the congressional mandate to report annually on national homelessness, HUD requires each CoC to implement an HMIS to capture standardized data about all persons accessing the homeless and at-risk of homelessness assistance system. The foundational 2004 Data and Technical Standards that established HMIS require that "PPI (protected personal information) collected … should be accurate, complete, and timely."

HMIS Software

The WellSky software product, Community Services (formerly ServicePoint), has been adopted by the HMIS@NCCEH Advisory Board with CoC representation as the official software. For the purposes of this document, HMIS refers to WellSky Community Services and all modules, assessments, and reporting capacities, standard or customized, contained therein. Only one HMIS software can operate per CoC. Victim Service Providers using comparable HMIS software determine their own software choice.

HMIS Data and Technical Standards

The Homeless Management Information System (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. HUD updates the HUD Data Standards Manual and the HMIS Data Dictionary approximately every two years and publishes them to the HMIS Data Standards website. the current HMIS Data Standards at the time of this document's creation. The FY 2022 HUD Data Standards Manual went into effect October 1, 2021 and remains 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.

What is Data Quality?

Data quality refers to the reliability and validity of client-level data collected in HMIS. It is measured by the extent to which the client data in the system reflects actual information in the

real world. The quality of data is determined by assessing the data for timeliness, completeness, accuracy, and consistency.

Completeness	Timeliness	Accuracy	Consistency
The degree to which all required data is known and documented. Completeness can be measured across the following areas: Client Record- the completeness of a person's HMIS record for a given project enrollment, as measured by completed response categories for required Data Elements Bed Coverage- the completeness of HMIS participation by bed units, with the total number of enrollments divided by the total number of homeless beds within the CoC's geographic coverage area	The length of time that elapses between the participant data collection and HMIS data entry stages. The sooner data is entered into HMIS, the sooner it is available for reporting and data analysis purposes.	The degree to which data reflects the best representation of the client's real-world situation and the programs that provide housing and services. Accurate data is highly dependent on comprehensive training and a thorough understanding of HUD and federal partner HMIS data standards, as well as data collection protocols.	The degree to which all data is collected, entered, stored, and reflective of the use of HMIS as a standard operating procedure. Consistency is representative of how well completeness, accuracy, and timeliness standards have been operationalized across the data collection and entry stages. Consistency relies on strong training for data collection and entry, as well as for project setup and report structures.

Why does Data Quality matter?

High-quality HMIS data 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
- Provides direct care staff with immediate access to important client information that can streamline and better coordinate service delivery
- Ensures the community is prioritizing the most vulnerable individuals and ensures accurate and successful referrals to housing programs
- Results in more accurate and complete reports for funders and stakeholders, including the System Performance Measures (SPMs), Longitudinal System Analysis (LSA), and the annual Point-in-Time (PIT) Count and Housing Inventory Count (HIC)
- Directly relates to the annual CoC Notice of Funding Opportunity (NOFO) process, impacting funding and allocation of resources

What are Data Quality Standards?

Data quality standards set expectations for the quality of data entered into HMIS and provide guidance to HMIS participating providers on how to capture and enter reliable and valid data for persons accessing the homeless assistance system.

What is a Data Quality Monitoring Plan?

A data quality monitoring plan is a set of procedures that outlines a regular, ongoing process for analyzing and reporting on the reliability and validity of the data entered into the HMIS at both the project and aggregate system levels. A data quality monitoring plan is the primary tool for tracking and generating information necessary to identify areas for data quality improvement.

The plan identifies the responsibilities of all parties within the CoC with respect to HMIS data quality, establishes specific data quality standards, and describes the procedures for implementing the plan and monitoring progress toward meeting data quality standards. The plan includes defining how improvement opportunities in data quality are addressed and establishes a timeliness standard for monitoring data quality on a regular basis.

HMIS@NCCEH Data Quality Standards

Data Timeliness Standard

Data timeliness is the length of time between when HMIS information is collected and when that information is entered into HMIS.

Data timeliness cannot be edited, it can only be improved going forward

Entering data in a timely manner can reduce human error that occurs when too much time has elapsed between the data collection/service transaction and the data entry. Timely data entry also ensures that data is accessible when it is needed and ensures that clients receive or make connections to the services they need in a quick and efficient manner.

HMIS@NCCEH encourages all agencies to aspire to 100% of data being entered into HMIS same-day in a timely manner, HUD recommends 48 business hours. However, HMIS@NCCEH recognizes 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 HMIS project type:

HMIS Project Type	Client Event	Timeliness Standard (Length of time to data entry in HMIS)
Coordinated Entry Homelessness Prevention Emergency Shelter Street Outreach Supportive Services Only Transitional Housing Rapid Re-Housing Permanent Supportive Housing Other Permanent Housing	• Entry • Interims • Exit	• 100% within 6 calendar days • 100% within 6 calendar days

If the information is not entered on the same day it is collected, the Participating Agency must ensure that the date associated with the information is the date on which the data was collected by backdating the information into the system using the Enter Data As function.

Data Completeness Standard

Universal Data Elements (UDE)

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 HMIS, regardless of funding source. The UDEs are the basis for producing unduplicated estimates of the number of people experiencing homelessness, and patterns of service use, including information on shelter stays and homelessness over time. The UDE collection also ensures that the CoC has sufficient client data to conduct basic analysis on the extent and characteristics of the populations they serve.

The Personally Identifiable Information (PII) and 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. A full description of UDEs can be found in the HUD Data Standards Manual.

Data Element	
3.01 Name	3.10 Project Start Date
3.02 Social Security Number	3.11 Project Exit Date
3.03 Date of Birth	3.15 Relationship to Head of Household
3.04 Race	3.16 Client Location
3.05 Ethnicity	3.20 Housing Move-in Date
3.06 Gender	3.917 Living Situation
3.07 Veteran Status	
3.08 Disabling Condition	

Program Specific Data Elements (PSDEs)

The Program Specific Data Elements (PSDEs) are elements that are required by at least one of the HMIS Federal Partner programs, such as the U.S. Department of Health and Human Services (HHS) or the U.S. Department of Veterans Affairs (VA). Some of the PSDE are collected across most Federal Partner programs. These are called "Common" Program Specific Data Elements, and they provide additional information about the characteristics of clients, the services they are provided, and program outcomes.

For the purposes of consistency, the data elements in the Project Entry Assessment are required for all projects entering data into HMIS@NCCEH. This is to ensure all service providers participating in the HMIS are documenting the data elements necessary to produce the required federal reports and to ensure the CoCs have sufficient data to conduct analysis on the extent and characteristics of the populations they serve.

PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence. Not all PSDEs are required by all project types. For example, Date of Engagement is only relevant to Street Outreach Projects.

Common PSDEs and Collection Point					
	Project Start	Occurrence	Update	Annual Assessment	Project Exit
4.02 Income and Sources	X		X	X	X
4.03 Non-Cash Benefits	X		X	X	X
4.04 Health Insurance	X		X	X	X
4.05 Physical Disability	X		X		X
4.06 Developmental Disability	X		X		X
4.07 Chronic Health Condition	X		X		X
4.08 HIV/AIDS	X		X		X
4.09 Mental Health Disorder	X		X		X
4.10 Substance Use Disorder	X		X		X
4.11 Domestic Violence	X		X		
4.12 Current Living Situation		X			
4.13 Date of Engagement		X			
4.14 Bed-Night Date		X			
4.19 Coordinated Entry Assessment		X			
4.20 Coordinated Entry Event		X			

The Usage of Client Refused, Client Doesn't Know, and Missing Data 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 and should not be used to indicate that the case manager or data entry staff does not know the client's response. They should only be used in cases where a client declines to provide a response or does not know the response to a data element.

"Missing data" is a category that represents all invalid and null responses to a required data element in HMIS. As described by the FY 2022 HUD Data Standards Manual:

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.

Data Completeness Standard

HMIS@NCCEH has established an acceptable range of "missing" and "client doesn't know/client refused" responses, as well as acceptable data error rates, depending on the data element and the project type. Previously published online. The percentages in the table below represent the maximum percentages allowed.

Data Quality: Personally Identifiable Information (6a)	Overall % error rate
Name (3.1)	5% or less
Social Security Number (3.2)	10% or less
Date of Birth (3.3)	5% or less
Race (3.4)	5% or less
Ethnicity (3.5)	5% or less
Gender (3.6)	5% or less

Data Quality: Universal Data Elements (6b)	Overall % error rate
Veteran Status (3.7)	5% or less
Relationship to Head of Household (3.15)	5% or less
Client Location (3.16)	5% or less
Disabling Condition (3.8)	5% or less
Data Quality: Income and Housing Data Quality (6c)	**Overall % error rate**
Destination (3.12)	15% or less *(For CE, SO and ES)* 10% or less *(For TH, RRH, & PSH)* 5% or less *(For HP)*
Income and Sources at Start (4.2)	5% or less
Income and Sources at Annual Assessment (4.2)	5% or less
Income and Sources at Exit (4.2)	5% or less
Data Quality: Chronic Homelessness (6d)	**Overall % error rate**
% of records unable to calculate	10% or less
Data Quality: Domestic Violence History (14a)	**Overall % error rate**
% of records "Data Not Collected"	5% or less
Data Quality: North Carolina County of Service (not in APR)	**Overall % error rate**
% of records missing data	5% or less
Data Quality: Housing Assessment at Exit (Homeless Prevention only *(24 of ESG CAPER*)	**Overall % error rate**
% or records "Data Not Collected"	10% or less

For reference, from [HUD's Data Quality Management Program](#) suggest the following baseline recommendations:

> *Street Outreach: 90% of required data elements (only applied after the client has a Date of Engagement)*
>
> *Emergency Shelter: 95% of required data elements*
>
> *Services Only (Excluded CE): 90% of required data elements*
>
> *Transitional Housing: 98% of required data elements*
>
> *RRH: 100% of required data elements*
>
> *PSH: 100% of required data element*
>
> *CE: 100 % (only applied after the client reaches a specific point in the CE process)*
>
> *HP: 90% of required data element*

Data Accuracy Standard

Information entered in HMIS needs to accurately represent the clients who are served by any homeless service projects contributing data to HMIS. 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 along 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 HMIS. Additionally, the Longitudinal System Analysis Guide (see Appendix A in the LSA Guide) looks at specific data quality issues in relation to that systemwide submission to HUD on an annual basis. These specific data quality and data accuracy pieces should be addressed in the reports run by the HMIS Lead on an ongoing basis.

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 household's situation; however, providers should strive to minimize data incongruity that occurs without explanation to help ensure the data reported accurately reflects the state of homelessness in the CoC.

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

Accuracy Measure	Data Element(s) Involved	Accuracy Test
Date of Birth <> Project Start Date	3.03 Date of Birth 3.10 Project Start Date	3.03 is not the same date as 3.10 for Heads of Household
Veterans are not minors	3.07 Veteran Status 3.03 Date of Birth	3.07 is not Yes for clients under 18 years of age

Household Error	3.15 Relationship to Head of Household (HoH)	At least one, and only one, Head of Household per household (no HoH is an error, multiple HoH is an error)
		No infant or young child Heads of Household
Disabling Condition and Sources are Congruent	3.08 Disabling Condition and Types Sources	If Yes to 3.08, then Yes to at least one source. If a source is selected, then 3.08 must be Yes.
Monthly Income and Sources are Congruent	4.02 Income and Sources	If Yes to 4.02, then Yes to at least one source. If a source is selected, then 4.02 must be Yes.
Non-Cash Benefits and Sources are Congruent	4.03 Non-Cash Benefits and Sources	If Yes to 4.03, then Yes to at least one source. If a source is selected, then 4.03 must be Yes.
Health Insurance and Type are Congruent	4.04 Health Insurance and Sources	If Yes to 4.04, then Yes to at least one type. If a type is selected, then 4.04 must be Yes.
Domestic Violence and Dependencies are Congruent	4.11 Domestic Violence (When experience occurred and Are you currently fleeing)	If Yes to 4.11, dependencies (When and Fleeing) are answered; If No to 4.11, dependencies are not answered
Housing Move In Date is accurate	3.20 Housing Move In Date 3.10 Project Start Date	3.20 does not predate 3.10

Accuracy Measure (for future development)	Data Element(s) Involved	Accuracy Test

Prior Living Situation and Dependencies are Congruent	3.917 Prior Living Situation - Length of time in previous place - Approximate date homelessness started - Number of times experiencing homelessness in the last three years - Number of months experiencing homelessness in the last three years	Dependencies (Approx. Date, Time, and Months) answered if 3.917/Length of Time indicate the client came from a homeless situation

Additionally, it is expected all HMIS Participating Agencies have a process in place to ensure the First and Last Names of clients are spelled properly and that the Date of Birth and Social Security Numbers are accurate.

- Staff should not assume they know the spelling of the name and should ask clients for the correct spellings.

- Staff may use Identification (ID) at intake to support proper spelling of the client's name, as well as the recording of the DOB. However, it should be made clear to the client that ID is not necessary for intake.

- Staff should keep in mind Equal Access Rule considerations for clients regardless of gender identity and their right to privacy and take into consideration CoC Equal Access Policies and Procedures.

- Agencies may enter data for clients with significant privacy needs under the "unnamed record" feature of the system. However, because identifiers are not stored using this feature, Users should take great care in creating the unnamed client by carefully entering the First and Last Name and the DOB. Agencies must maintain names and HMIS Client ID number crosswalks off-line in a secure location as this information will be required to find the record again.

All HMIS Participating Agencies must also have an organized exit process that includes:

- Educating clients and staff on the importance of planning and communication regarding Discharge Destination and outcomes
- Training staff on the exit destination guidance
- Defined processes for collecting this information from as many households as possible.
- Procedures to communicate exit information to the person responsible for data entry, if not entering real time.

Data Consistency Standard

Data consistency means that data is understood, collected, and entered in the same way across all projects in HMIS. Consistency directly affects the accuracy of data. To ensure that data collected and entered into HMIS are consistent across all projects:

- Initial User Training Standard: All HMIS End Users must complete an initial training before activated in the HMIS system and must sign a User Agreement. Users must sign in to HMIS within 30 days of receiving licensure information. Additional training opportunities beyond initial training are available and readily offered by the HMIS Lead Agency.
- Monthly Activity User Standard: End Users must log into HMIS at least once every 30 days to maintain active user status. Users should be entering data on a regular and consistent basis, not only to prevent a backlog of data entry but also to ensure users maintain familiarity with HMIS and the workflows for which they are responsible.
- New agency standard: New agencies that join HMIS are required to attend a comprehensive new agency orientation with the NCCEH Data Center to review and understand all policies and procedures including data quality requirements.

HMIS Bed Coverage Standard

HMIS Bed Coverage is the number of homeless services program beds in the CoC's geographic area that contribute data to HMIS. Emergency Shelter, Transitional Housing, Rapid Rehousing, and Permanent Supportive Housing are the project types that contribute to bed coverage. Without a high percentage of HMIS Bed Coverage within a CoC, the data within HMIS is never holistic, and CoCs cannot truly understand how both their system and the clients served within their system are functioning.

HMIS@NCCEH will ensure that HMIS bed coverage is as close to 100% as is possible for applicable project types and will focus on project types with less than 85%. Bed coverage for improvement efforts include:

- HMIS@NCCEH Advisory Board will monitor bed coverage annually.
- The HMIS Lead Agency will produce recruitment materials to demonstrate the benefits of joining HMIS and continually improve the agency on-boarding process to ensure new agencies are set up for success.
- CoC Lead Agencies will collaborate with HMIS Lead Agency to align non-Federal grants and awards for funding with HMIS requirements.

The HMIS@NCCEH Data Quality Monitoring and Reporting

Overview

Monitoring and reporting are essential to measuring the degree to which participating organizations are maintaining high Data Quality, according to the benchmarks. The monitoring and reporting procedures are designed to be constructive and empowering for participating organizations, as opposed to punitive.

Method: HMIS Participating Agencies run and submit Data Quality Monitoring Reports for HMIS Lead and CoC review.

Frequency: Quarterly for year-to-date data (on the Federal Fiscal Year). For example, reports for the first quarter would cover October – December data, for the second quarter would cover October – March data, and so on.

Roles and Expectations

All HMIS-participating organizations, regardless of project type and funding source, are expected to adhere to the data quality standards as laid out in this Data Quality Plan for completeness, timeliness, accuracy, and consistency.

Should an organization fail to uphold the data quality standards, the organization shall implement a Data Quality Improvement Plan. Failure to comply with a created Data Quality Improvement Plan could result in the following:

- Loss of HMIS User Licenses
- Loss of access to HMIS as an organization
- Decreased or loss of funding, if applicable

HMIS Participating Organizations

The responsibilities of all HMIS-participating organizations include the following:

- Maintain an active Agency Administrator licensed user
- Maintain a high level of HMIS data quality, meeting the minimum benchmarks laid out in the Data Quality Monitoring Plan
- Review reports and make data corrections as applicable before submission
- Submit data reports for monitoring and community reporting
- Seek assistance from the NCCEH Data Center and/or CoC when there are questions about HMIS and HMIS data quality
- Be responsive to questions and requests from both the NCCEH Data Center and CoC related to HMIS data quality
- Inform the NCCEH Data Center when changes occur within the organization that specifically relate to HMIS and/or HMIS data quality, including
  - When an existing HMIS User no longer needs access to the system
  - When a new HMIS Users needs to receive training to become a User
  - When an existing HMIS project ends, prior to the project's termination

o   When a new HMIS project needs to be created, prior to the project's operation

Continuums of Care (CoC)

- Specify the CoC entity that will review their providers' performance
- In conjunction with the HMIS Lead, ensure all HMIS-participating agencies understand the Data Quality Plan and its importance
- Provide a clear and transparent process to provide organizations encouragement and enforcement as it related to HMIS data quality
- Ensure the HMIS Lead has sufficient resources to be as proactive in HMIS data quality monitoring as possible
- Work collaboratively with HMIS Lead to develop Data Quality Improvement Plans
- In conjunction with the HMIS Lead, determine the consequences for the organizations should they fail to abide by the Data Quality Improvement Plan

HMIS Lead (NCCEH)

The responsibilities of the HMIS Lead include the following:

- Provide oversight for monitoring the Data Quality Plan
- Provide sufficient training, resources, materials, and follow-up to all HMIS-participating organizations and their HMIS users to ensure a high level of understanding related to entering data into HMIS
- Be responsive to organization's questions and concerns related to HMIS
- Provide tools for organizations to monitor their own data quality in HMIS
- Ensure the organizations and their HMIS Users understand the data entry requirements related to the specific projects they enter into HMIS
- Work collaboratively with CoC Leads to develop Data Quality Improvement Plans
- Implement consequences should organizations fail to fulfill the Data Quality Improvement Plan

HMIS@NCCEH Advisory Board

- Ensure implementation has enforceable agreements for the Data Quality Plan including, Operating Policies & Procedures, Agency Participation Agreements, and HMIS User Agreement and Ethical Standards
- Ensure the HMIS Lead has sufficient resources to be as proactive in HMIS data quality monitoring as possible

Encouragements and Enforcements

The CoCs, in conjunction with the HMIS Lead, will monitor data quality, and the following encouragements and enforcements are in place to ensure providers understand the importance of data quality within HMIS.

ENCOURAGEMENTS

- The CoC will use data quality in HMIS during the annual rank and review process for CoC dollars. In order to be eligible for CoC dollars, projects will need to submit reports in a

timely manner, maintain a baseline threshold data quality requirement and will be awarded additional points for going above and beyond the baseline. Guidance on specifics of this process will be released each year with the local CoC NOFA competition process.
- The CoC will make data quality a meeting agenda item at regular Board meetings and will acknowledge providers meeting a high level of data quality in the meeting minutes which will be posted on the CoC's website.
- The CoC will acknowledge the work of providers meeting a high level of data quality every quarter during the CoC Governance Meeting, appropriate Subcommittees, via the CoC e-newsletter, or other public forums that acknowledge the work done to address data quality in HMIS.

ENFORCEMENTS

- Commitment to the Data Quality Plan is included in Agency Participation Agreements for each agency joining HMIS@NCCEH.
- Commitment to the Data Quality Plan is included in the User Responsibility and Code of Ethics Agreement
- Notifying Agency leadership including Executive Directors or supervisors
- Locking specific Providers or Users out of HMIS until they receive remedial or additional training from the HMIS Lead and show that data quality is a focus.
- Removing the ability of a given User to access and enter data into HMIS if data quality becomes a consistent issue that is not acknowledged or addressed.
- Restricting additional funding, or withholding funding, from projects until data quality meets, at a minimum, the baseline threshold for the given project type.
- Preventing agencies from applying for new or additional dollars during RFP processes.

Compliance and Monitoring Frequency

The HMIS Lead Agency will develop a virtual portal for participating organizations to access submission links and resources for support. CoC Lead Agencies and any designated CoC entity responsible for review will have access to submissions.

For each HMIS participating Project, organizations will submit their report with summary of data quality and a copy of the report. Summary results of data quality can be compared to the report file as needed. Data quality results by data element can be saved for future analysis.

Submissions three times a year will encourage regular review and corrections for improved Data Quality. 30 calendar days after the last month of the trimester, all participating organizations will be expected to submit their projects' reports. If the 30th falls outside of regular business days, then the deadline will be the next business day. Below is the 2023 calendar:

Month Trimester ends	Submission Deadline
January	March 2, 2023 (*before plan passed*)
May	June 305, 2023
September	October 30, 2023
January	March 1, 2024

Agencies are expected to conduct additional data quality monitoring more frequently (monthly or weekly). Quarterly submissions will be in addition to any other reporting reviews that are required for CoCs or organizations to meet their federal and funding requirements.

Sample Data Quality Improvement Plan

Issue	Baseline Not Currently Being Met	How to Address	How Often and Who is Responsible	Date Completed
[Example] Destination data completeness rate an issue for three consecutive reporting periods.	Destination data completeness less than 95 percent (includes "no exit interview completed" responses).	In-person meeting with agency, HMIS Lead, and CoC to discuss what is happening "in real life" and "real world" implications of poor destination data completeness rates.	Initially—Ongoing, if needed (Agency, HMIS Lead, CoC)	
		Review paper intake/exit assessments to ensure necessary data elements are included on the forms.	Initially (Agency, with input from HMIS Lead as needed)	
		Provide refresher training to HMIS users to ensure data entry for destination data is	Ongoing, if needed (HMIS Lead)	

Additional Narrative:

Example: If the organization does not remain communicative and interactive with the HMIS Lead to address the issue by following through with the above steps, the CoC will consider this DQIP in default and will use incentives and enforcements available, including a loss of supports and dollars currently provided to the organization.

Acknowledgment and Acceptance of Data Quality Improvement Plan

_____   _____

Program Manager/Organization Executive Director   HMIS Lead Manager/Director