



**HMIS Oversight Committee
Agenda
Wednesday, February 10, 2021
9:00 a.m.-11:00 .m.
[Join Zoom Meeting](#)
Phone: 669 900 6833
Meeting ID: 896 4459 6358
Passcode: 562371**

Meetings are public. Homeless and formerly homeless Alameda County residents are encouraged to attend. Public Comment will be taken at the beginning of each meeting and is limited to 2 minutes per person. [Click here to learn more about the public participation policy.](#)

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|---------------------------------------------------|-----------------------|
| 1. Welcome | 9:00-9:05 AM |
| 2. HMIS Oversight Public Comment | 9:05-9:15 AM |
| 3. Coordinated Entry 2.0 Update | 9:15-9:20 AM |
| 4. COVID-19 Vaccine Tracking in HMIS | 9:20-10:00 AM |
| 5. Data Quality Plan | 10:00-10:30 AM |
| • Updates from HMIS Lead on Implementation | |
| 6. Privacy and Security Updates/Discussion | 10:30-11:00 AM |



Homeless Management Information System (HMIS) Oversight Committee

Meeting Notes

January 13, 2021

Meetings are public. Homeless and formerly homeless Alameda County residents are encouraged to attend. Public Comment will be taken at the beginning of each meeting and is limited to 2 minutes per person. [Click here to learn more about the public participation policy.](#)

The regular meeting of the HMIS Oversight Committee was called to order at 9:03 a.m. on January 13, 2021 on Zoom by Mike Keller.

Present: Patrick Crosby (HMIS Lead), Jessica Shimmin (EveryOne Home), Mike Keller, HMIS Oversight Committee Chair (East Oakland Community Project), Margaret Alfaro (Abode Services), Alexis Lozano (EveryOne Home), Martha Elias (Health Care Services Agency), Suzanne Warner (Health Care Services Agency), Jonathan Russell (Bay Area Community Services), Tunisia Owens (Continuum of Care Committee and Family Violence Law Center) Nic Ming (City of Oakland), John Noe (HMIS Lead), Andy Duong (HMIS Lead), and Riley Wilkerson (Housing and Community Development Dept.)

Absent: Laurie Flores (City of Fremont) and Josh Jacobs (City of Berkeley)

Guests: Jessica Hanserd

The committee reached a quorum so it can vote on items at this meeting.

1. Welcome

2. HMIS Oversight Public Comment

- No public comment.

3. HMIS Privacy and Security Update

- The policies developed by the work group are currently being reviewed by Alameda County's legal team. The goal is for the policies to come back to this committee in February for approval. Additionally, a plain language expert is developing a quick guide of the policy highlights. The current rollout schedule has communications including tools, procedures, and forms going out to providers May 1st. Training is likely to be web based with the option of having Question & Answer calls.

4. Point In Time Count and Homeless Inventory Count Updates



- In January the Continuum of Care (CoC) Committee approved the Point in Time (PIT) Count Advisory Committee's recommendation to request from the US Department of Housing and Urban Development (HUD) a waiver of all unsheltered PIT Count requirements.
- It is likely HUD will require our community to do a full count in 2022.
- The sheltered PIT Count and Housing Inventory Count (HIC) will take place in 2021 as usual during the last 10 days of January. Sheltered PIT and HIC data is collected from administrative data sources such as the HMIS and contribute to homeless service planning and system development.
- The due date for all data is April 30th.
- Staff received clarification that shelter beds that are dedicated to serving homeless people should be counted in the HIC and sheltered PIT, regardless of funding source. Specifically, Federal Emergency Management Agency (FEMA) and Emergency Solutions Grant-Cares Act(ESG-CV) funded beds are to be counted in HIC and PIT. There were just two Roomkey sites that were not exclusively homeless serving.
- For the HIC and sheltered count, providers would like to provide requested data to HMIS and set up a meeting to talk through the nuances with HMIS team. The HMIS team will begin communication to agencies, including projects with numbers down in their Rapid Re-Housing (RRH) projects and agencies that need additional assistance with data collection and clean up.
- There was a recommendation to have the count be the night of January 27th.

5. Coordinated Entry 2.0 Updates

- The BitFocus contract for building out the new Coordinated Entry workflow and HUD's 2020 data standards was approved by the county Board of Supervisors on Tuesday (1/5/2021). The HMIS team is working with the Office of Homeless Care and Coordination (OHCC) to plan the rollout of changes and training.

6. Longitudinal Systems Analysis Submission Update

- HMIS Lead is required to submit the requested data by Friday, January 15th to HUD. Data is from federal fiscal years 2019 and 2020. There have been several submissions to date and the HMIS team is working through errors and flags. Once the final submission is submitted, HUD will determine usability of data and incorporate it into the Stella performance analysis and visualization tool.

7. Review FY20 System Performance Measures

- The system performance measures are due to HUD on or before March 1, 2021. Each CoC submits the same measures so that performance can be tracked nationally. Measure 6 is reserved for high performing CoCs and we do not report on it.

8. HMIS Oversight Committee Work Plan/Schedule Discussion

- The committee reviewed the work plan and schedule. As the privacy and security work winds down, the committee recommended the work groups continue to tackle some of these items between committee meetings.



- It would be helpful for the committee to know how many hours of work these items would require.
- There was a recommendation to change “agency manager” to “agency liason” because this “manager” references a particular license and access level in Clarity.
- The HMIS team will communicate with EveryOne Home staff and Mike Keller, HMIS Oversight Committee Chair on items where work groups are needed by next Wednesday.
- *Mike K. made a motion to approve the work plan and schedule. Nic M. seconded. The motion passed unanimously.*

Submitted By: Alexis Lozano

Reviewed By: Mike Keller, Jessica Shimmin, Chelsea Andrews

Alameda County Homeless Management Information System (ACHMIS)

Data Quality Action Plan

Action Step Needed	Staff to be Involved	Staff Responsible	Timeline for action	Notes
Community Roll-out of Action Plan	John Noe	John Noe	January – March 2020	Will introduce Data Quality Report and Policies and Procedures to User Groups once approved by the CoC Committee.
Develop Agency Liaison role	Patrick Crosby, ACHMIS Administrator, will draft roles and responsibilities of an Agency Liaison	Oversight Committee (OC) will review, discuss, and finalize the Agency Liaison roles and responsibilities	December 2019 and January 2020	
Identify Agency Liaison	Agency Staff will identify an Agency Liaison and provide contact information to ACHMIS staff at HMISsupport@acgov.org ; Agency Staff will identify replacements upon departure of a liaison	John Noe, ACHMIS DQ Lead, will develop and publish a roster of Agency Liaisons	February - March 2020	
Convene and Train Agency Liaisons	John Noe	John Noe	April 2020	Begin gathering of Liaisons for training on reports and expectations. Develop schedule for monthly meetings.

Alameda County Homeless Management Information System (ACHMIS)

Data Quality Action Plan

Action Step Needed	Staff to be Involved	Staff Responsible	Timeline for action	Notes
Generate Agency Data Quality (DQ) Reports	Agency Liaisons will generate the reports and ensure that they accurately reflect the agency's performance.	DQ Lead will collect and review reports	Beginning April 2020, continuing monthly as part of the Data Quality Meeting	
Identify agencies not meeting DQ standards	Agency Liaisons with measures that are out of tolerance will identify projects	DQ Lead will work with Liaisons to identify out of tolerance agencies	Monthly as preparation for User Group review	
Obtain explanation for not meeting DQ standards	Liaisons will provide explanations of issues causing non-compliance	DQ Lead will collect issues, analyze for trends and report to Oversight Committee (OC) as needed	Monthly as preparation for User Group review; Quarterly as preparation for OC review	
Identify plan to improve DQ	Liaison will develop a plan for improving DQ at the project level; may seek support from ACHMIS staff; identify training needs	DQ Lead will identify systemic issues; propose policy changes or clarifications; improve training curriculum; propose workflow changes or provide	Monthly bring change proposals to OC; provide process clarification to user community; emphasize workflow issues	

Alameda County Homeless Management Information System (ACHMIS)

Data Quality Action Plan

Action Step Needed	Staff to be Involved	Staff Responsible	Timeline for action	Notes
		process clarification	causing DQ problems Quarterly highlight improvements	
Identify technical support needs or retraining opportunities	Liaisons identify projects needing focused TA	DQ Lead provide or facilitate additional hands-on support to staff in coordination with Liaison	As needed Coordinated use of training facility; Hands-on facilitated training by ACHMIS staff; Supervised workflow compliance	Goal is to use proposed modularized Learning Management System tools to retrain aspects of workflow
Disseminate process improvement or process changes widely	Liaisons identify process issues needing improvement, suggest process changes	DQ Lead gather, synthesize, and present process recommendations to OC; OC consider changes and taken action to approve, deny, or postpone changes; DQ Lead process OC action and	Monthly User Group session will discuss recommendations to provide feedback to OC; OC will review, discuss, and take action on proposals; DQ Lead will incorporate	Resources will be updated and maintained on the HMIS Support Portal as identified on the ACHMIS website: http://acgov.org/cda/hcd/hmis/materials.htm

Alameda County Homeless Management Information System (ACHMIS)

Data Quality Action Plan

Action Step Needed	Staff to be Involved	Staff Responsible	Timeline for action	Notes
		publish process changes appropriately	changes into workflow training and publish revisions to the user community	
Publish system performance reports	Liaisons will prepare agency level reports, review reports, certify that they accurately reflect agency performance, and forward them to DQ Lead by deadlines; Liaisons will include their findings for areas out of tolerance	DQ Lead will prepare system-wide report, synthesize and incorporate agency findings, and provide reports to OC by deadlines	Quarterly OC will review system-wide reports highlighting areas of improvement and reviewing plans for improving areas out of tolerance	OC will determine at which point reports will be made public

Alameda County Homeless Management Information System

Data Quality Policies and Procedures

General Objective:

Data quality is built on five pillars: Timeliness; Completeness; Accuracy; Consistency; and Coverage. The policies and procedures are designed to strengthen each of these pillars to improve the reliability of analysis of the data and measure the effectiveness of the provision of homeless services within Alameda County. The goal of our community members should be to regularly review data quality and consistently make improvements in their data quality measures.

- 1. Timeliness:** Timeliness measures the period of time between a program entry or program exit date and when the data is entered into HMIS. The shorter the period between the time the data was collected and the time the data was entered, the more beneficial the data is to the community in order to track services and provide accurate reporting. These data are used to inform decisions about providing client supports. Timely data supports good decisions.

1.a. Policy:

Participating agencies/jurisdictions should use the Alameda County Continuum of Care (CoC) standard forms for collecting the Universal Data Elements (UDEs) required by HUD at project enrollment, annual updates, and project exit.

1.b. Standard:

The eventual goal of the Alameda County CoC is for 100% of project entry and exit data be entered in the HMIS within three days of actual program entry or exit date. During 2020, the first year of implementation of this standard, the overall system wide benchmark is for 75% of data to be entered within 3 days.

1.c. Procedure:

Participating agencies/jurisdictions run the HUD Annual Performance Report (APR) or HMIS Data Quality Report at the project level at least once a month to monitor overall agency performance.

The information should be used to identify potential workflow issues or staffing issues that are contributing to delayed data entry.

Timeliness Data Source: DQR Q6 and Q1 or APR Q6e and Q5a				
Data Entry / Days after collection	Project Starts	% of Total	Project Exits	% of Total
0-3 days	DQR Q6 row 1 + 2	DQR Q6 row 1 + 2 / Q1 row 1 as %	DQR Q6 row 1 + 2	DQR Q6 row 1 + 2 / Q1 row 5 as %
4+ days	DQR Q6 row 3 + 4 + 5	DQR Q6 row 3 + 4 + 5 / Q1 row 1 as %	DQR Q6 row 3 + 4 + 5	DQR Q6 row 3 + 4 + 5 / Q1 row 5 as %

- 2. Completeness:** Completeness is a measure of whether all of the required data elements are entered into HMIS, and whether all of the persons being served are reported in HMIS. Error rates include missing data, data not collected, client doesn't know, client refused, and fields with data quality issues. Data should be collected on all clients being served or assessed.

2.a. Policy:

All UDEs on standard data collection forms are required to be collected.

Alameda County Homeless Management Information System

Data Quality Policies and Procedures

2.b. Standard:

5% or less error rate for ES, TH, RRH, PSH, SSO, HP and Other projects.

25% or less error rate for SO and CES projects prior to clients having an engagement date. 5% for SO and CES projects after an engagement date.

Annual updates should be completed on all clients enrolled more than twelve months. The annual update should be completed thirty days before or after the client's anniversary date.

2.c. Procedure:

Participating agencies/jurisdictions should run the HUD Annual Performance or the HMIS Data Quality Report looking specifically at Personally Identifiable Information, Universal Data Elements, Income and Housing Data Quality, and Chronic Homelessness.

At a minimum the reports should be run on an agency-wide basis at least once a month to monitor overall agency performance. The information should be used to identify data collection and data entry problems and resolutions to those problems such as staff training.

Personally Identifiable Information - Data Source: DQR Q2 or APR Q6a		
Data Element	Error Count	% of Error Rate
Name (3.1)	DQR Q2 row 1 col 1+2+3	DQR Q2 row 1 col 4 as %
Social Security Number (3.2)	DQR Q2 row 2 col 1+2+3	DQR Q2 row 2 col 4 as %
Date of Birth (3.3)	DQR Q2 row 3 col 1+2+3	DQR Q2 row 3 col 4 as %
Race (3.4)	DQR Q2 row 4 col 1+2	DQR Q2 row 4 col 4 as %
Ethnicity (3.5)	DQR Q2 row 5 col 1+2	DQR Q2 row 5 col 4 as %
Gender (3.6)	DQR Q2 row 6 col 1+2	DQR Q2 row 6 col 4 as %
Overall Score		DQR Q2 row 7 col 4 as %

Universal Data Elements - Data Source: DQR Q3 or APR Q6b		
Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	DQR Q3 row 1 col 1	DQR Q3 row 1 col 2 as %
Project Start Date (3.10)	DQR Q3 row 2 col 1	DQR Q3 row 2 col 2 as %
Relationship to Head of Household (3.15)	DQR Q3 row 3 col 1	DQR Q3 row 3 col 2 as %
Disabling Condition (3.8)	DQR Q3 row 4 col 1	DQR Q3 row 4 col 2 as %

Income and Housing Data Quality – Data Source: DQR Q4 or APR Q6c		
Data Element	Error Count	% of Error Rate
Destination (3.12)	DQR Q4 row 1 col 1	DQR Q4 row 1 col 2 as %
Income and Sources (4.2) at Start	DQR Q4 row 2 col 1	DQR Q4 row 2 col 2 as %
Income and Sources (4.2) at Annual Assessment	DQR Q4 row 3 col 1	DQR Q4 row 3 col 2 as %
Income and Sources (4.2) at Exit	DQR Q4 row 4 col 1	DQR Q4 row 4 col 2 as %
Non-Cash Benefits (4.3) at Start	DQR Q4 row 5 col 1	DQR Q4 row 5 col 2 as %
Non-Cash Benefits (4.3) at Annual Assessment	DQR Q4 row 6 col 1	DQR Q4 row 6 col 2 as %
Non-Cash Benefits (4.3) at Exit	DQR Q4 row 7 col 1	DQR Q4 row 7 col 2 as %

Chronic Homelessness - Data Source: DQR Q5 or APR Q6d		
Data Element	Error Count	% of Error Rate
Starting into Project Type		
ES, SH, Street Outreach		DQR Q4 row 1 col 7 as %
TH		DQR Q4 row 2 col 7 as %
PH (all)		DQR Q4 row 3 col 7 as %

Annual Assessment – Data Source: APR Q16		
Data Element	Error Count	% of Error Rate
Adults Missing Annual Assessment	APR Q16 row 12 col 2	APR Q16 row 12 col 2 / Q5a row 8 as %

Alameda County Homeless Management Information System

Data Quality Policies and Procedures

3. Accuracy: Accuracy is a measure of the validity of the data whether there are inconsistencies within a client record. We also look for indicators that project data is unlike other similar projects. Accuracy is best checked by comparing documentation in client files to project data elements.

3.a. Policy:

Agency staff should maintain electronic client records in HMIS that accurately reflect the current situation. This should include maintaining the client’s enrollment information and ensuring that project census data is accurate on any given night or period of operation.

3.b. Standard:

Standard for annual assessments aligns with the 5% maximum on missing data fields.

100% of PSH should have move in dates.

100% of RRH with rental subsidy should have move in dates documented in HMIS.

0% child and unknown age heads of household, except for RHY programs.

Enrolled project population should not exceed project capacity unless overflow capacity is established and reported to the HMIS lead for the Housing Inventory Count (HIC).

Client demographics and program data elements should be consistent with project eligibility requirements.

3.c. Procedure:

Participating agencies/jurisdictions should run the HUD Annual Performance, Data Quality Report and Missing Move-In Date Report and any community reports found in the data quality section of the reporting tool.

At a minimum the reports should be run on an agency-wide basis at least once a month to monitor overall system performance. The information should be used to identify potential workflow issues or staffing issues that are contributing to delayed data entry.

Accuracy – Data Source: Missing Move-In Dates and DQR Q1 or APR Q5a	
Project	Count in HMIS
PSH – missing move-in date	Missing Move-In Dates
RRH – missing move-in date	Missing Move-In Dates
HoH – unknown age	DQR Q1 row 15

4. Consistency: Consistency looks at agency and project performance metrics. The measure looks for abnormalities in performance objectives. Clients served should meet qualifications. Throughput should be somewhat consistent over periods of time. Performance outcomes should be reasonably consistent as well. Additionally, data collection should be consistent with other projects of the same type within the Continuum of Care.

4.a. Policy:

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Data Quality Policies and Procedures

Client and project data should be collected on data collection forms that are standardized and maintained by the CoC and communicated to the HMIS Lead. Supplemental data should be collected on supplemental assessments defined by the program funder. Agencies can collect additional supplemental data by coordinating with HMIS staff to develop a supplemental assessment that maintains data consistency across the CoC.

4.b. Standard:

Coordinated entry assessment should be done on a standard assessment tool used by the CoC.

Participating agencies must check whether a client record already exists in HMIS before creating a new client record in order to avoid creating duplicate records.

Project enrollments should be done on a standard set of forms used by the CoC.

Supplemental project data should be collected on supplemental forms and entered on supplemental screens common to that project type.

Supplemental agency data should be collected on supplemental forms and entered on supplemental screens common to that agency’s projects.

4.c. Procedure:

Participating agencies/jurisdictions should run the HUD Annual Performance and any community reports found in the data quality section of the reporting tool. At a minimum the reports should be run on an agency-wide basis at least once a month to monitor overall system performance. The reports can be run at the project level to identify underperforming projects. The information should be used to identify potential workflow issues or staffing issues that are contributing to delayed data entry.

Should be reviewed by the CoC HMIS Oversight Committee on at least a quarterly basis. Timeliness metrics should be included in program incentives and reporting requirements for funding.

Additional procedures will be included in the development of a data quality monitoring plan.

Consistency – Data Source: Duplicate Clients and TBD	
Data Element	Current status
Coordinated entry assessment / standard assessment	TBD
Duplicate clients should not be created	Duplicate Clients
Project enrollments / standard forms	TBD
Supplemental project data / supplemental forms and screens	TBD
Supplemental agency data / supplemental forms and screens	TBD

(*): This is the duplicate count as reported by the HMIS, which is limited in its detection AI. Estimates may be as high as 3000.

5. Coverage: Coverage is the measure of how completely bed and unit inventory information is captured in HMIS. Coverage is measured at the project level by dividing the total number of beds represented in HMIS by the total number of beds available in the project. At the agency and system level, coverage is measured by dividing the total number of beds, for that project type, that are represented in HMIS by the total number of beds available for that project type.

5.a. Policy:

Alameda County Homeless Management Information System

Data Quality Policies and Procedures

All housing dedicated to improving the living situation of homeless people in Alameda County should capture client and project data in HMIS.

5.b. Standard:

Goal of 95% coverage across emergency shelter, transitional housing, rapid re-housing, and permanent supportive housing that appear in the HIC.

5.c. Procedure:

Agencies should ensure that all beds are recorded in and enrolled through HMIS, regardless of funding source.

The HMIS Lead should present coverage rates to HMIS Oversight Committee and CoC Board twice a year.

HMIS Oversight Committee and CoC Board identify and outreach to providers and programs that aren't in the HMIS.

Partner agencies must communicate changes in bed capacity as soon as possible to the HMIS Lead for incorporation in the Housing Inventory Chart (HIC).

Coverage – Data Source: HIC			
HIC Beds - HH Type - Bed Type	HIC Beds Count	HMIS Beds	% HMIS Bed Coverage
Year-Round ES Beds for HH w/o Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round ES Beds for HH with Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round ES Beds for HH with only Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Total Seasonal Beds	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Overflow Beds	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round PH Beds for HH w/o Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round PH Beds for HH with Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round PH Beds for HH with only Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round TH Beds for HH w/o Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round TH Beds for HH with Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %
Year-Round TH Beds for HH with only Children	Sum of Beds by type	Sum of HMIS Beds by type	HMIS Beds / Beds as %

Best Practices:

Data Quality Monitoring Plan

Agency Liaisons

Beginning in 2020, all participating agencies are expected to identify an “Agency Liaison” for HMIS. The Agency Liaison is responsible for working with the HMIS Lead to identify and correct data quality issues.

The Agency Liaisons will attend a monthly meeting to review data quality and performance. Agencies should be prepared to share their performance, discuss challenges, and develop strategies to improve performance.

HMIS Lead Agency

Convenes monthly meetings of Agency Liaison.

Provides ongoing trainings to support agencies to improve and maintain data quality.

Alameda County Homeless Management Information System

Data Quality Policies and Procedures

Runs systemwide reports for review by HMIS Oversight, CoC, and other CoC Committees as requested.

HMIS Oversight Committee

HMIS Lead will present data quality reports to HMIS Oversight Committee on a quarterly basis, and to the HUD CoC on a semi-annual basis.

HUD CoC Committee

The CoC Committee will include the Alameda County data quality standards as part of the evaluation and scoring criteria for the annual CoC Local Competition for HUD funding.

The CoC Committee will collaborate with funders to include data quality standards in program contracts and monitoring, as well as performance incentives and reporting requirements for funding.

Reports:

APR: [HUDX-227-AD] Annual Performance Report [FY 2020] (Multiple Agency) or [HUDX-227] Annual Performance Report [FY 2020] (Single Agency)

DQR: [HUDX-225-AD] HMIS Data Quality Report [FY 2020] (Multiple Agency) or [HUDX-225] HMIS Data Quality Report [FY 2020] (Single Agency)

Duplicate Clients: [DQXX-110-AD] Duplicate Clients

HIC: [HUDX-123-AD] Housing Inventory (HIC) [FY 2020] (Multiple Agency)

Missing Move-in Dates: Missing Move-in Dates (Data Analysis)

TBD: Report to be developed by ACHMIS staff in Data Analysis tool