HMIS Oversight Committee Meeting Notes DRAFT
September 14, 2022
9:00 a.m. – 11:00 a.m.

Meetings are public. Alameda County residents with lived experience of homelessness 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.

Attendance: Michelle Ogburn (Abode Services), Nic Ming (Chair, Social Impact Wheel), Jonathan Russell (Bay Area Community Services), Josh Jacobs (City of Berkeley), Suzanne Warner (Health Care Services Agency), Tunisia Owens (Family Violence Law Center), Mike Keller (Chair, East Oakland Community Project)

EOH Staff: Katie Haverly (Acting Executive Director)

HMIS Lead: John Noe (Housing and Community Development), Alex Baker (Alameda County Housing and Community Development),

Public: Carina Lieu (Health Care Services Agency),

1. Welcome (Nic Ming) 9:00 – 9:05
2. Approval of Meeting Minutes, 8/10/22 (Katie Haverly) 9:05 – 9:10

   Action Item
   • Michelle Ogburn (Abode Services) made the motion to approve the meeting minutes. Nic Ming (Social Impact Wheel) seconded.
     o 2 approved
     o 3 abstained
     o 0 opposed
     o Motion passed

3. HMIS Oversight Public Comment (Katie Haverly) 9:10 – 9:20
   • No public comment

4. Discussion on Governance Transition (Katie Haverly) 9:20 – 9:30

   Update
   • Katie shared updates on the Governance Transition:
     o The HMIS Committee has requested to be considered a standalone committee as opposed to a subcommittee. However this recommendation was unable to be presented to the Leadership Board at the August meeting due to time constraints.
     o The plan is for this recommendation to be presented to the Leadership Board on the 22nd.
• Katie suggested changing the name of the committee from the HMIS Oversight Committee to HMIS Committee.
  o Group agrees with this recommendation.
  o Name change will be presented to the LB meeting on August 22nd.
• Katie shared updates on the Racial Equity Work Group
  o During the group’s first meeting tomorrow, they will review committee applications for Continuum of Care (CoC) to ensure language and presentation encourages recruitment of a diverse group of candidates.
  o The nominating committee will put out this call for recruitment in the next couple of weeks.
• Nic raised the update that the composition of the committees will be shifting; the number of individuals with lived experience must increase to make up 30% of the committees.
  o Nic also stated he is interested in turning over the position of co-chair to another person.
• Katie shared the update that the Transition Committee will be meeting later today to finalize revisions to the board charter
  o One suggestion was that each committee should have two co-chairs, one from the public government sector, one from the non-profit/community sector.
• Tunisia requested clarification on the transition timeline.
  o Katie stated that the timeline as it currently stands is for the CoC Committee to be seated in early November, HMIS Committee to be seated in late November/early December with seating new committees and sunsetting old ones following after.

5. HMIS Lead Updates (Alex Baker) 9:30 – 10:00

Privacy and Security Policies and Training
• Alex Baker (HMIS team) shared that their team is currently in the process of uploading all of the training materials and doing a cleanup to provide a clear path of how to navigate to the website to find all of the new privacy and security documents.
• The goal is to be ready to go live Oct 4th and to give folks 60 days to complete training and for everyone to complete this training by the end of the year.
• On the backend, they are trying to find a way to track this training.
• A confirmation email will go out sometime next week with a confirmed go live date.
• Alex confirmed that informed consent had been considered, and that the training will illustrate what to select if the user is doing informed consent.
• Katie brought up a previous idea of building a larger database for tracking HMIS training to make it clearer to identify when individuals haven’t yet done a training or need to redo a training. Alex stated that a more robust biannual training and training tracking system is on their team’s longer-term agenda.

Data privacy issues when clients are also staff members within CoC
• Questions have arisen on how to handle sensitive information. For example, if a person who has been served by an HMIS agency in the past then later goes on to work for another HMIS agency and wants to keep their information private, how would one handle that situation considering that we cannot delete information from HMIS?
  o Alex pointed out that the HMIS training does give guidance on what the system should be used for but also suggested perhaps checking in with HUD
TA or other CoC’s about how they handle complicated cases of confidentiality.

- Jonathan stated the need for an official policy or guidance around both obscuring (or not obscuring) records and for keeping HMIS from being used in ways it’s not meant to be used.
- Michelle suggested that HUD might not be the best agency to go to in terms of guidance on confidentiality. Michelle also suggested that records could be archived after 7 years rather than have people’s data just residing in databases for decades.

**Public/Client record request for HMIS data policy and procedure**
- Alex provided the update that the HMIS team has been working with HUD TA on a procedure for answering public or client HMIS record requests.
  - The HMIS team would handle the initial response but would essentially connect the requestor with the last agency the individual was served with.
  - The HMIS team can act as a go-between if needed but allows the agency to provide the actual records.

**Policy for closing out HMIS tickets for latent response**
- The HMIS ticket latent response policy is now active. If a ticket has been waiting for a user response for more than 30 days, it will automatically close. The ticketing system sends out automated responses informing the user and providing prompts for the user to reopen the ticket if needed.
- This policy was sent out to all users in the last user group meeting.

**Agency Onboarding Questionnaire/Policy**
- New questionnaire and policy for streamlining agency onboarding are complete.
- They are not live yet, but Alex will know when they will be able to go live by the end of the week.

**Work Group/ICF TA Update** (Alex Baker/Nic Ming/Mike Keller): 10:00 – 10:30
- Alex provided the update that the work group/ICF TA is going well, moving forward constructively.
- Nic elaborated that the work group has reviewed a draft of the onboarding questionnaire and the HMIS client record request policy.

**Reminder of date/time for participation (Thursdays at 1 PM)**
- Katie raised the point that not everyone can make the Thursdays at 1 pm and opened the floor to suggestions on how to keep the group inclusive given everyone’s schedules.

**Data Quality Plan Implementation**
- Nic shared the update that they have broken up the data quality plan into a number of actionable pieces, a main piece being the pilot of the funder liaison role.

**Pilot of Funder Liaison Role – Timeline and next steps**
- Nic shared that they are ready to move forward with starting a dialogue with a few targeted funders; an email has been drafted for the funder liaison pilot.
- The work group is moving forward with identifying dates in October to get the conversation started with the pilot funders but they still need to set a timeline for how long the pilot will run.

**Draft email for the funder liaison pilot:**
https://docs.google.com/document/d/11dxTPwYzX6MgwUddCD5bQ3FrxdKPWibJaOB7Aca3M5U/edit

**Workgroup topics:** exchanging data between HMIS and HMIS like systems. For example EHR
Record interfacing with HMIS with data dump
- Jonathon spoke in favor of moving toward more integrated systems with the ability to push data into/out of HMIS as opposed to relying on manual entry systems. Jonathon stated that in other agencies, he has seen better quality and more timely data in systems where data pushing is available.
- Katie requested Jonathon get information regarding the cost of moving toward one of these systems from another CoC.

7. HMIS Lead Monitoring – Annual Requirement (Nic Ming/Mike Keller): 10:30 - 10:50
   Recommendation for tool selection and timeline for implementation
   Action Item
- Nic provided the update that this year’s HMIS Lead Monitoring has not yet been performed. A more extensive tool for monitoring has been needed to deepen the level of monitoring.
- Nic proposed using the previously used tool to complete this year’s HMIS Lead Monitoring and working on a more extensive tool to use for the next monitoring in early 2023.
- Katie raised the idea that the tool could potentially be modified just in the notes column and that working through those modifications could be done quickly but that the priority is to complete the monitoring before the committee is transitioned.
- Suzanne made the motion to approve the usage of the previous tool on this year’s HMIS Lead Monitoring. Mike Keller seconded.
  - 6 approved
  - 0 abstained
  - 0 opposed
  - Motion passed
- Alex stated that this would be the priority at the workgroup meeting next Thursday.

8. Upcoming HMIS OS Committee Reporting to Other Committees 10:50 - 10:55
   Leadership Board voting on HMIS Committee as standalone committee
- Katie brought up that there are only 1-2 more meetings with this standing group.

9. Proposed items for October 12 meeting (Mike Keller) 10:55 – 11:00
   Mike Keller presented the following proposed items for potential priorities for the next meeting:
   - Review data quality and occupancy reports
     - Conversation with committee after conversation with Agency Liaisons about data issues
   - Review/update/finalize training curriculum
   - Feedback/input from users, funders, consumers
   - Review/update Communications Plan
     - Nic brought up that some of the items that have not been discussed at all might be better to save for the new committee and Mike agreed.
   - Review HMIS Lead Work Plan Progress
   - Development of HMIS Committee workplan for FY 2023

The suggestion of prioritizing training and data quality was raised, and Mike agreed.
What is a HMIS Funder Liaison and why are they important?

The HMIS Funder Liaison is a newly created role in Alameda County to help support data quality for the Homeless Information Management System (HMIS), the important data system that houses information about clients seeking homeless service supports. This data system helps to:

- Track who is experiencing a housing crisis and what their needs are
- Track resources our county has to those experiencing a housing crisis
- Assist in matching resources to people
- Track important system performance measures to monitor outcomes for those experiencing homelessness
- Track equitable distribution of services and supports

Thus, it is very important that the data entered into this system is timely, accurate, complete and consistent across all providers to ensure individuals are served and supported as best as possible by the homeless response system.

The Funder Liaison is an individual that represents a funding agency (city, county, state, federal, foundation, etc.) that funds one or more homeless service providers in Alameda County. Their role is to partner with the Agency Liaison from that provider to review and monitor data quality that is entered into the HMIS system on a regular basis to ensure that data in the HMIS system is of high quality. The HMIS Funder Liaison collaborates and communicates on an ongoing basis with HMIS Lead and Grantee Agency (Provider) that to ensure that the agency’s data for funded programs are in compliance with U.S. Department of Housing and Urban Development (HUD), State and other funders, and Continuum of Care (CoC) policies and procedures.

What does a HMIS Funder Liaison do?

The HMIS Funder Liaison supports data quality of the providers they fund that utilize the HMIS data system by:

- **Reviewing data quality reports** presented to them by the Agency Liaison (designated for each provider they fund) on a quarterly basis and troubleshooting strategies and solutions with Agency Liaisons related to data quality issues that emerge from the reports.
- **Collaborating with the HMIS Lead** on any ongoing data quality issues that need more strategic support and resources to overcome including identifying workflow issues, policy revisions, training needs, and technical support needs.
- **Celebrating and acknowledging** those programs with consistent high data quality and those that have improved their data quality. Perhaps even providing incentives or other perks to high performing providers.
• Attend quarterly HMIS User group meetings with other Funder Liaisons to address data quality issues and participate in thought partnership around what metrics are most important to track and monitor in the system.

• Serves as a central contact with HMIS Lead to help craft communication and action items to Grantees to meet periodic system requirements, for example support and encourage important timelines regarding data cleaning and data preparation for the annual NOFO process.

How Does one become designated as a Funder Liaison for their Programs?

The ideal is that all funders that support programs utilizing the HMIS system will designate one Liaison to support this data quality initiative. Please contact John Noe at John.Noe2@acgov.org to sign up to be the Liaison for your agency/organization. The ACHMIS team will be able to help orient you to the new role and support your data review needs. For more information about the HMIS data system, please visit https://achmis.org/.

Your support of this Important effort is greatly appreciated!
HMIS Funder Liaison Pilot

Overview for Initial Discussion with Potential Funder Liaisons

HMIS Workgroup

Oakland-Berkeley-Alameda County Continuum of Care
What is the Funder Liaison Pilot?

• The HMIS Funder Liaison is a newly created role in Alameda County to help support data quality for the Homeless Information Management System (HMIS).

• We are starting with a pilot that will pair a few Funder Liaisons with Agency Liaisons.

• The pilot participants can help shape the process and share feedback about what works.

• After the pilot, we plan to roll-out the project more broadly. Idea is for all funders to designate a liaison.
### Preliminary Roles in the Funder Liaison Pilot

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
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</table>
| **HMIS Lead**         | - Alameda County Housing & Community Development (HCD) serves this role.  
                        - Manages Alameda County HMIS.  
                        - Offers guidance, training, and support to Funder and Agency Liaisons.            |
| **Funder Liaison**    | - Represents a funding agency of homeless service provider(s).  
                        - Reviews data quality reports.  
                        - Partners with Agency Liaison to offer support re: data quality.  
                        - Communicates needs for training, etc. to HMIS lead.                              |
| **Agency Liaison**    | - Represents a homeless service provider that uses HMIS.  
                        - Runs data quality reports.  
                        - Partners with Funder Liaison to develop strategies to improve data quality.  
                        - Supports other agency staff re: HMIS data quality efforts.                      |
More on the HMIS Funder Liaison Role

Funder Liaisons support data quality by:

- **Review data quality reports** on a quarterly basis. Troubleshoot solutions with Agency Liaisons re: data quality issues.

- **Collaborate with the HMIS Lead** on any ongoing data quality issues that need more strategic support and resources (training, TA, policy, etc.)

- **Celebrate and acknowledge** programs with consistent high data quality and those that have improved their data quality.

- **Attend quarterly HMIS User Group meetings** with other liaisons.

- **Serve as a central contact with the HMIS Lead** by helping craft/distribute key communication to agencies on data quality.
Identifying Funder Liaisons

• Staff member who has experience with HMIS.
• Some background in data work/data quality.
• Has the time available for the role/meetings.
• If possible, someone who has a relationship with the Agency Liaison.
• If there is more than one Funder Liaison with an organization/department, would like to have a designated point of contact for HMIS Lead.
**Time Commitment for Funder Liaisons**

**Once a quarter** (~5 hours per quarter):

- Review data quality report.
- Meet with Agency Liaison to review report and strategize (may include some follow up communication, as needed).
- Attend HMIS Liaison meetings.

**Periodically:**

- Training for Funder Liaisons.
- Help distribute communication on data quality.
- Communicate needs with HMIS Lead.
Why is HMIS so important?

The HMIS data system helps to:

- **Track who** is experiencing a housing crisis and what their needs are.
- Track **resources** our county has to those experiencing a housing crisis.
- Assist in **matching resources** to people.
- Track important **system performance measures** to monitor outcomes for those experiencing homelessness.
- Track **equitable distribution** of services and supports.
Data Quality Components

High quality data that can help inform and strengthen the homeless response system
Benefits of the Funder Liaison Project

• Increase regular communication between funders, agencies and HMIS Lead.

• Contribute to a high-quality data system.

• Help identify how the HMIS Lead and the CoC can support system-wide data quality through training, technical assistance, policy updates, etc.

• Make data quality improvement efforts part of regular routines throughout the year.
Using a Strengths-Based Approach

• Building positive relationships between Funder and Agency Liaisons.
• Celebrating strengths, as well as identifying challenges.
• Exploring incentives for high data quality.
Questions?
Discussion: Current Practices

• What are any current practices in terms of data monitoring, if any?
• What tools do you use to review data with agencies?
• How does data quality relate to funding opportunities?
Discussion: Logistics

• How does the time commitment sound?
  • Attending HMIS Liaison Meetings monthly vs. quarterly?

• How best to match Funder and Agency liaisons (considering agencies have multiple funders)?
Discussion: Approach to the Pilot

• How to use a strengths-based approach to the monitoring process?

• What strategies and tools might you need to help support Agency Liaisons?

• What type of training would be useful to you?
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. Leading up to that goal, in Year 1 of this plan the expectation is for project entry and exit data to be entered within 3 days or less for 75% of clients, and in Year 2, the expectation is for project entry and exit data to be entered within 3 days or less for 85% of clients. In Year 3, the expectation is for project entry and exit data to be entered within 3 days or less for 95% of clients.

1.c. **Procedure:**
Participating agencies/jurisdictions run the HUD Annual Performance Report (APR) or HMIS Data Quality Report (DQR)1 at the project level at least once a month to monitor overall agency performance. Agency Liaisons should also run this report on a quarterly basis to share and discuss with the Funder Liaison. Reports should 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.

Timeliness should be reviewed at the Agency Liaison Meeting that is convened monthly and facilitated by the HMIS Lead. Agencies should be prepared to share their performance, discuss challenges, and develop strategies to improve performance.

HMIS Lead should present timeliness reporting to HMIS Oversight Committee on a quarterly basis.

The CoC should add timeliness to the scoring criteria for the annual CoC Local Competition for funding.

1.d. **Best Practice:**
Running reports on a bimonthly basis (agency staff or Agency Liaison) and correcting data quality issues uncovered by the reports builds a culture of timeliness. A more specific timeliness report can be created to assist with more accurate data to

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1 The HUD Annual Performance Report (APR) includes additional data points not required for the data quality report so may take longer to run, and the HMIS Data Quality Report (DQR) is more specific and may run more quickly. Either report is acceptable for the purposes of the data quality plan.
reflect recent enrollments. Workflow and staffing issues are discovered early which greatly reduces the systemwide impact of data issues. Timeliness metrics should be included in program contracts and monitoring, as well as performance incentives and reporting requirements for funding.

<table>
<thead>
<tr>
<th>Data Entry / Days after collection</th>
<th>Project Starts</th>
<th>% of Total</th>
<th>Project Exits</th>
<th>% of Total</th>
<th>Year 1 Goals</th>
<th>Year 2 Goals</th>
<th>Year 3 Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3 days</td>
<td>DQR Q6 row 1 + 2</td>
<td>DQR Q6 row 1 + 2 / Q1 row 1 as %</td>
<td>DQR Q6 row 1 + 2</td>
<td>DQR Q6 row 1 + 2 / Q1 row 5 as %</td>
<td>&gt;75% of client entries</td>
<td>&gt;85% of client entries</td>
<td>&gt;95% of client entries</td>
</tr>
<tr>
<td>4+ days</td>
<td>DQR Q6 row 3 + 4 + 5</td>
<td>Q6 row 3 + 4 + 5 / Q1 row 1 as %</td>
<td>DQR Q6 row 3 + 4 + 5</td>
<td>Q6 row 3 + 4 + 5 / Q1 row 5 as %</td>
<td>&lt;25% of client entries</td>
<td>&lt;15% of client entries</td>
<td>&lt;5% of client entries</td>
</tr>
</tbody>
</table>

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 data on standard collection forms is required to be collected. 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. Those collecting data should attempt to have as few null, missing, “data not collected,” “client refused,” and “client doesn’t know” options as possible.

2.b. **Standard:**

5%* or less error rate for ES, TH, RRH, PSH, Supportive Services Only, Homeless Prevention, Coordinated Entry and Other projects.

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.

*15% or less error rate for Street Outreach. Only those participants with a date of engagement entered would be included in this error rate calculation.

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Error Count</th>
<th>% of Error Rate</th>
<th>Maximum Acceptable Error Rates (ES, TH, RRH, PSH)</th>
<th>Maximum Acceptable error rates for Street Outreach Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name (3.1)</td>
<td>DQR Q2 row 1 col 1+2+3</td>
<td>DQR Q2 row 1 col 4 as %</td>
<td>5%</td>
<td>15%</td>
</tr>
<tr>
<td>Social Security Number (3.2)</td>
<td>DQR Q2 row 2 col 1+2+3</td>
<td>DQR Q2 row 2 col 4 as %</td>
<td>10%</td>
<td>20%</td>
</tr>
<tr>
<td>Date of Birth (3.3)</td>
<td>DQR Q2 row 3 col 1+2+3</td>
<td>DQR Q2 row 3 col 4 as %</td>
<td>5%</td>
<td>15%</td>
</tr>
<tr>
<td>Race (3.4)</td>
<td>DQR Q2 row 4 col 1+2</td>
<td>DQR Q2 row 4 col 4 as %</td>
<td>10%</td>
<td>20%</td>
</tr>
<tr>
<td>Ethnicity (3.5)</td>
<td>DQR Q2 row 5 col 1+2</td>
<td>DQR Q2 row 5 col 4 as %</td>
<td>5%</td>
<td>15%</td>
</tr>
<tr>
<td>Gender (3.6)</td>
<td>DQR Q2 row 6 col 1+2</td>
<td>DQR Q2 row 6 col 4 as %</td>
<td>5%</td>
<td>15%</td>
</tr>
<tr>
<td>Overall Score*</td>
<td>DQR Q2 row 7 col 4 as %</td>
<td>DQR Q2 row 7 col 4 as %</td>
<td>10%</td>
<td>20%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data Element</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Veteran Status (3.7)</td>
<td>DQR Q3 row 1 col 1</td>
<td>DQR Q3 row 1 col 2 as %</td>
<td>5%</td>
<td>15%</td>
</tr>
</tbody>
</table>
If overall score has more than 5% error rate those errors should be attributable to errors in race/ethnicity and/or social security number.

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 to ensure % error rates are within the standard guidelines listed above.

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.

Completeness should be reviewed at the Agency Liaison Meeting that is convened monthly and facilitated by the HMIS Lead. Agencies should be prepared to share their performance, discuss challenges, and develop strategies to improve performance. Agency Liaisons should also run this report on a quarterly basis to share and discuss with the Funder Liaison.

2.d. Best Practice:

Running reports on a bimonthly basis and correcting issues uncovered by the reports builds a culture of completeness. Workflow and staffing issues are discovered early which greatly reduces the systemwide impact of data entry errors.

3. ACCURACY: Accuracy is a measure of how well the client record reflects the client experience. Accuracy is the most difficult to measure objectively. We look for indicators that are inconsistent within a client record. We also look for indicators that project data is unlike other similar projects. Accuracy is best checked by comparing project hard copy 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 accurately reflects the project population on any given night or period of operation.

3.b. Standard:

Client characteristics (and demographics) and program data elements should be consistent with project eligibility requirements (for example veteran status, family structure, income requirements, etc.)

100% of PSH and RRH entries should have move in dates documented in HMIS once participant has moved in.

The enrolled project population should match the project capacity (+/- 5%). Exceptions should be established and reported to the HMIS lead for the Housing Inventory Count (HIC) monthly.

Current Living Situation Assessments should be conducted every calendar month for those actively enrolled in coordinated entry.

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 that would be relevant and helpful.

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 data accuracy issues.

Accuracy should be reviewed at the Agency Liaison Meeting that is convened monthly and facilitated by the HMIS Lead. Agencies should be prepared to share their performance, discuss challenges, and develop strategies to improve performance. Agency Liaisons should also run this report on a quarterly basis to share and discuss with the Funder Liaison.

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

<table>
<thead>
<tr>
<th>Accuracy – Data Source: Missing Move-In Dates and DQR Q1 or APR Q5a</th>
<th>Maximum Acceptable Error Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project</td>
<td>Count in HMIS</td>
</tr>
<tr>
<td>PSH – missing move-in date</td>
<td>Missing Move-In Dates</td>
</tr>
<tr>
<td>RRH – missing move-in date</td>
<td>Missing Move-In Dates</td>
</tr>
</tbody>
</table>

3.d. Best Practice:

Running reports on a bimonthly basis and correcting issues uncovered by the reports builds a culture of accuracy. Workflow and staffing issues are discovered early which greatly reduces the systemwide impact of data issues.

4. CONSISTENCY: Consistency is the degree to which all data is collected, entered, stored, and reflective of the use of HMIS as a standard operating procedure. Consistency will be representative of how well completeness, accuracy, and timeliness standards have been operationalized across the data collection and entry stages. Consistency may also refer to the data storage, table structure, and overall reliability of the HMIS database management process. In this regard, consistency bridges data quality across data collection, entry, and management stages and should be considered a shared responsibility across multiple HMIS stakeholders.
As with accuracy, strong data consistency also relies on excellent training—both for data collection and entry, as well as for project setup and report structures. Consistency in data entry for project types from provider to provider is essential. For example, a permanent supportive housing (PSH) project run by Provider A should have the same workflow as a PSH project run by Provider B. All stakeholders have a role in ensuring data consistency.

4.a. Policy:

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:

All clients should have one single record, duplicate clients should never be created.

Project enrollments should be completed on a standard set of designated enrollments used by the CoC.

Coordinated entry assessments should be done on designated online assessments 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 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 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. Agency Liaisons should also run this report on a quarterly basis to share and discuss with the Funder Liaison.

4.d. Best Practice:

Running reports on a bimonthly basis and correcting issues uncovered by the reports builds a culture of consistency. Workflow and staffing issues are discovered early which greatly reduces the systemwide impact of data issues.

Agencies should use regular reporting to ensure that project performance is meeting or exceeding project expectations and is consistent with project expectations.

All HMIS users must complete required trainings before gaining access to the system. All Coordinated Entry Users should complete required trainings before gaining access to the system.

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:

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 90% coverage across emergency shelter, transitional housing, rapid re-housing, and permanent supportive housing that appear in the Housing Inventory Count (HIC).

5.c. Procedure:

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

Agency Liaisons should also run the HIC report on a quarterly basis to share and discuss with the Funder Liaison.

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).

<table>
<thead>
<tr>
<th>Coverage - Data Source:</th>
<th>HIC Beds - HH Type - Bed Type</th>
<th>HIC Beds Count</th>
<th>HMIS Beds</th>
<th>% HMIS Bed Coverage</th>
<th>Acceptable % Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Year-Round ES Beds for HH w/o Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round ES Beds for HH with Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round ES Beds for HH with only Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Total Seasonal Beds</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Overflow Beds</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round PH Beds for HH w/o Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round PH Beds for HH with Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round PH Beds for HH with only Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round TH Beds for HH w/o Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Year-Round TH Beds for HH with Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
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<tr>
<td></td>
<td>Year-Round TH Beds for HH with only Children</td>
<td>Sum of Beds by type</td>
<td>Sum of HMIS Beds by type</td>
<td>HMIS Beds / Beds as %</td>
<td>90%</td>
</tr>
</tbody>
</table>

Reports Needed to Support Data Quality:


**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)
<table>
<thead>
<tr>
<th>AREA</th>
<th>PRIORITIES &amp; ACTION ITEMS</th>
<th>TIMING</th>
<th>FREQUENCY</th>
<th>HMIS Lead</th>
<th>EOH</th>
<th>HMIS OVERSIGHT COMMITTEE</th>
<th>AGENCY LIAISON</th>
<th>FUNDER LIAISON</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>CREATE DATA QUALITY ACTION PLAN (DQAP)</td>
<td>Convene HMIS Workgroup to revise/review Data Quality Action Plan</td>
<td>March 2022</td>
<td>Once a Year</td>
<td>Participate in workgroup</td>
<td>Invite additional workgroup participants based on expertise in workgroup topic areas</td>
<td>Oversight committee convene workgroup to start DQAP</td>
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<td></td>
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<tr>
<td></td>
<td>Draft Outline of updated DQAP 2022</td>
<td>April 2022</td>
<td>Once a Year</td>
<td>Draft documents from workgroup</td>
<td>Review and approve DQAP</td>
<td></td>
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<tr>
<td>ROLL OUT OF DQAP</td>
<td>Communication and roll out of new DQAP</td>
<td>April/May 2022</td>
<td>Once a Year</td>
<td>Communicate with HMIS User Group about the plan and its priorities/components</td>
<td>Communicate about updated DQAP in CoC Committee meetings where appropriate, publish on EOH website</td>
<td>Participate in communicating out about updated data plan</td>
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<tr>
<td>DATA QUALITY MONITORING: AGENCY LIAISON</td>
<td>Each agency must identify an Agency Liaison and provide contact info to ACHMIS Staff</td>
<td>May 2022</td>
<td>Once a Year and whenever there is turnover</td>
<td>Develop and publish a roster of Agency Liaisons</td>
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<td></td>
<td>Convene and Train Agency Liaisons</td>
<td>May 2022</td>
<td>Once a year for main training. Training also incorporated in monthly Liaisons meetings</td>
<td>Develop training for Agency Liaisons</td>
<td></td>
<td></td>
<td></td>
<td>Consider building self-guided trainings to assist with turnover</td>
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<tr>
<td></td>
<td>Generate Agency Data Quality Reports</td>
<td>Ongoing</td>
<td>Monthly - by the 1st of the month</td>
<td>Collect and review all reports</td>
<td></td>
<td></td>
<td></td>
<td>Generate and review reports</td>
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</tr>
<tr>
<td>AREAS</td>
<td>PRIORITIES &amp; ACTION ITEMS</td>
<td>TIMING</td>
<td>FREQUENCY</td>
<td>SUPPORT AGENT Liaisons</td>
<td>EOH</td>
<td>HMIS OVERSIGHT COMMITTEE</td>
<td>AGENCY LIAISON</td>
<td>FUNDER LIAISON</td>
<td>NOTES</td>
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<tr>
<td></td>
<td>Identification and Exploration of poor performing programs</td>
<td>Ongoing</td>
<td>Monthly</td>
<td>Support Agency Liaisons with programs with persistent DQ issues</td>
<td>Review ongoing persistent data quality issues</td>
<td>Work with Funder Liaison on programs with persistent DQ issues</td>
<td>Assist Agency Liaison with poor performing programs</td>
<td>Poor Performance could be managed by: - NOFO scoring points - Public reporting of data quality - Creation of additional training - Celebration of high performing agencies - Corrective action plans - Incentives - Suspending licenses (last resort)</td>
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<tr>
<td></td>
<td>Engage Funders to identify Funder Liaison Role</td>
<td>Jun/Jul 2022; Sept 2022</td>
<td>Update agency onboarding form to identify Funder Data Liaisons</td>
<td>Compile Materials to document role development to as part of DQP</td>
<td>Draft outreach to funders identified to participate in pilot to share about the role and to invite schedule discussions</td>
<td>Provide Feedback as invited</td>
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<td></td>
<td>Train and Convene Funder Liaisons</td>
<td>Quarterly</td>
<td>Prepare topics and agenda - confirm agency and data Liaisons monthly meeting schedule 2022.</td>
<td>Provide templates for CoC Committees orientation to guide building orientation materials for consistency</td>
<td>Collaborate with HMIS Lead and EOH to build HMIS Funder Data Liaison Orientation deck</td>
<td>Attend HMIS Oversight discussion about role</td>
<td>Complete HMIS Funder orientation during the monthly HMIS Liaisons meeting and facilitated by the HMIS Lead team.</td>
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<tr>
<td>TOPICS</td>
<td>PRIORITIES &amp; ACTION ITEMS</td>
<td>TIMING</td>
<td>FREQUENCY</td>
<td>KEY STAKEHOLDERS - ROLES &amp; RESPONSIBILITIES</td>
<td>NOTES</td>
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<tr>
<td>DATA QUALITY MONITORING</td>
<td>Analyzing and reviewing Data Quality Reports</td>
<td>Ongoing</td>
<td>Occupancy Report, Agency Liaison Summary Reports, Data Quality Report/Report Card, APR Reports, HIC Report</td>
<td>Generate and distribute reports with key insights gleaned from each report to focus discussions in HMIS OS Committee and HMIS User Group Meetings</td>
<td>Review data quality reports, identify areas for improvement and generate action steps for change</td>
<td>Ensure data quality reports are timely to meet review deadlines</td>
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<td>Soliciting user feedback to better understand: - training needs - system issues - new user needs</td>
<td>Ongoing</td>
<td>Quarterly with a survey to HMIS User Group</td>
<td>HMIS Lead collect issues, analyze for trends and report to Liaisons and Oversight Committee (OC) as needed; Developing tips and tricks for regular errors that could be shared with user group and/or on website</td>
<td>Review survey data from HMIS User group quarterly where appropriate</td>
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<td></td>
<td>Identification of systemwide process improvements needed</td>
<td>Ongoing</td>
<td>Monthly User Group Meetings can address larger process/system issues; Quarterly HMIS OS Committee meetings can explore larger system issues</td>
<td>Gather, synthesize, and present process recommendations to OC; Coordinate recommendations made by HMIS OS Committee to implement in the field</td>
<td>Support thinking and problem solving around systemwide issues to develop policy, resource, or other related solutions</td>
<td>Provide recommendations for system improvement to HMIS Lead</td>
<td>Bit Focus relationship is a key stakeholder for process improvements; Resources will be updated and maintained on the HMIS Support Portal as identified on the ACHMIS website: <a href="http://acgov.org/cda/hcd/hmis/materials.htm">http://acgov.org/cda/hcd/hmis/materials.htm</a></td>
<td></td>
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</tbody>
</table>