

Bakersfield-Kern HMIS Data Quality Plan

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Table of Contents

Introduction.....3

What is Data Quality.....4

Data Quality.....4

Importance of Data Quality for HMIS Goal.....4

Data Quality Issues and Standards.....6

Universal Data Elements.....10

Data Quality Components.....14

Data Quality Monitoring and Reporting Process.....16

HUD Reports.....18

Incentives and Enforcement.....22

Introduction

The U.S. Department of Housing and Urban Development (HUD) mandates that all Continuum of Care (CoC) organizations receiving HUD grants implement and utilize a Homeless Management Information System (HMIS) or a similar database to collect data on the clients served and the projects assisting those clients. Additionally, federal regulations require that all homeless projects receiving ESG, HOPWA, or HHAP funding must report client-level data into an HMIS. The only exceptions to these requirements are projects specifically focused on serving victims of domestic violence and agencies whose primary mission is to serve these victims.

Kern Health Systems, acting as the Homeless Management Information System Lead Agency (“HMIS Lead”), oversees the HMIS on behalf of Kern County’s Continuum of Care (“CoC”). This system is governed by the CoC Board of Directors (“BoD”) through the “HMIS Data Quality Subcommittee.” The CoC is a local collaborative group of stakeholders dedicated to ending homelessness in Kern County. This body includes, but is not limited to, nonprofit homeless service providers, victim service organizations, faith-based groups, local government entities, businesses, advocates, public housing agencies, schools, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations supporting homeless and formerly homeless veterans, including the Veterans Administration (VA). Homeless and formerly homeless persons and families also play an integral role in the CoC.

Within the CoC, specific agencies, typically service providers directly engaging with homeless clients, actively use and contribute to the HMIS. Any agency with access to the HMIS is required to sign a Memorandum of Understanding (MOU) or a Data Sharing Agreement and is considered a “participating agency.” Together, the HMIS Lead and all participating agencies form the Bakersfield Kern Regional Homeless Collaborative (“Collaborative”).

The Clarity Homeless Management Information System (HMIS) is Kern County’s electronic data collection system that tracks client-level data for individuals and families receiving homeless and other human services across the community. In addition to maintaining client and agency information, the HMIS assists in program administration, operations, and reporting. It is a versatile tool used for functions such as managing bed/unit availability and service delivery. Some key benefits of the HMIS include:

- Improved service delivery and timely client referrals
- Immediate access to essential client information
- Efficient and straightforward report preparation for funders and stakeholders

What is a Data Quality Plan?

A data quality plan is a community-level document that supports the Continuum of Care (CoC) in achieving reliable, statistically valid data. This plan sets clear expectations for the CoC, the Homeless Management Information System (HMIS) Lead Agency, and end users to ensure accurate data is captured about individuals accessing the homeless assistance system in the community.

Developed by the HMIS Lead Agency and formally adopted by the CoC, the plan:

- Outlines the responsibilities of all parties within the CoC concerning data quality.
- Sets specific benchmarks for data quality, focusing on timeliness, completeness, accuracy, and consistency.
- Details the procedures for implementing the plan and tracking progress toward meeting data quality goals.
- Defines a regular schedule for monitoring data quality.

Data Quality

Definition of Data Quality

HMIS data quality refers to how accurately the data recorded in Kern HMIS reflects real-world information. The goal is to maintain a data quality threshold of 90%. In an ideal scenario, data would perfectly match reality, yielding a data quality rating of 100%. Conversely, a 0% rating would indicate no correlation between the data entered HMIS and the actual information. While no data collection system achieves a 100% quality rating, the goal for Kern HMIS is to present the most accurate and consistent information about homelessness. To achieve this, it's essential that the HMIS accurately represents the reality of homelessness, and the services provided to those experiencing it.

The objective is to record the most accurate, consistent, and timely data, which will allow for reasonable conclusions about:

- The extent of homelessness
- The effectiveness of homelessness services

Importance of Data Quality for HMIS Goals

Data quality improves significantly when the goals of data collection are clearly defined. The goals of HMIS, on a national level, were outlined by Congress:

“There has never been an overall review or comprehensive analysis on the extent of homelessness or how to address it. The Committee believes that it is essential to develop an unduplicated count of homeless people, and an analysis of their patterns of use of assistance ...including how they enter and exit the homeless assistance system and the effectiveness of assistance.”

These national goals target key information, including:

- The extent of homelessness
- The nature of homelessness (as implied in the “comprehensive analysis”)
- Patterns of homeless service use
- The effectiveness of the homeless service system

These objectives are critical not only at the federal level but also for local understanding and program planning.

Extent of Homelessness

The number of homeless individuals has long been a point of debate, especially as homelessness has been acknowledged as a social issue. Due to inconsistent or nonexistent data collection, different estimation methods result in vastly varied numbers. One of the primary goals of HMIS is to estimate the number of homeless people in a way that closely mirrors reality. By collecting personal information from all clients served, HUD aims to generate an unduplicated count of homeless individuals who access services nationally.

Achieving this goal relies on the accuracy and completeness of personal identifying data, such as Social Security Numbers, names, gender, and date of birth. These data points help to create accurate unduplicated counts.

Nature of Homelessness

HMIS also collects data on the characteristics of individuals receiving homeless services. Analyzing this information on a broader scale will enhance our understanding of the people experiencing homelessness, the challenges they face, and their specific service needs. To achieve this, high-quality data is necessary, including information on gender, date of birth, race, ethnicity, veteran status, disability status, and household composition.

Pattern of Homeless Service Utilization

Homeless individuals often use multiple programs to access housing, resolve crises, receive support, and connect with other services. Accurate program entry and exit dates, along with information about the client’s residence before program entry, are crucial for understanding service use patterns. This helps assess the average length of stay and

movement between different homeless programs. The collection of accurate identifying information at each program is also essential to track the extent to which clients appear in multiple programs, how they move through the system, and to identify cycles of homelessness.

Effectiveness of the Homeless Service System

Assessing the effectiveness of the homeless service system is vital for finding solutions to end homelessness. Information gathered at program exit, such as client destination and income, helps determine whether the system has successfully addressed the client's housing crisis and improved their overall stability. Additionally, data on returning clients contributes to this assessment. By comparing program entry and exit data at the aggregate level, we can evaluate the impact of homeless programs on the clients they serve.

Data Quality Issues and Standards

Timeliness of Data

To ensure that the data is as up to date as possible, information should be entered into the system as soon as it is collected. Data that tends to change periodically, such as income sources and amounts, must be regularly verified and updated. For all data except intake information, updates should be made monthly, by the fifth working day of the following month.

Reporting Submission Deadlines:

- Complete and accurate data for the month must be entered into HMIS by the fifth working day of the following month. For example, data for the month of April must be entered into Clarity by the fifth working day of May.
- Data Quality Reports (Snapshots) will be sent out monthly.
- Corrections and feedback on these reports are due within 10 days of their issuance.

Data Completeness

For the HMIS to provide meaningful information, the data must be as complete as possible. This means that all required information for individuals served in a specific program (e.g., emergency shelter) during a specified time must be entered. On a larger scale, ensuring adequate HMIS coverage and participation by all local programs is essential for ensuring that the records reflect all clients served. If a client's record is missing, aggregate reports may not accurately represent the individuals served by the program. Likewise, if an entire program's data is missing, the HMIS may fail to accurately reflect the homeless population in the community.

Missing Client Records

Even when all programs are participating, it's still possible for some client records to be missing. This is especially problematic as the extent of missing client records is difficult to quantify. Missing client data may skew findings, like how missing programs can affect data accuracy.

Agencies are encouraged to compare paper records (e.g., shelter check-in lists) with the data entered into HMIS to address missing client records.

Incomplete Client Records

Incomplete client records refer to missing fields within individual records. To ensure completeness, required fields must be consistently filled. This is enforced by setting certain fields as mandatory in the software application and by providing clear instructions for intake and discharge.

If a client doesn't know or refuses to answer a question, the response should be recorded as "Data not Collected" (or preferably "don't know" or "refused") rather than leaving the field blank.

Data Accuracy

Accurate data collection and entry into HMIS are essential to ensure that the information accurately reflects the reality of homelessness, and the services provided to individuals. All data entered HMIS must precisely represent the information provided by the client, as documented in the client's file, and reflect the services or housing received by the client.

Any changes or updates in client information should be entered into HMIS as soon as they occur to maintain the integrity of the data. This ensures that the system remains up-to-date and reliable, supporting effective service delivery and decision-making.

Common Errors in Data Accuracy

Unintentional errors during intake and data entry can include:

- Selecting the wrong response from a dropdown menu
- Misspelling or typographical errors
- Transposing characters or missed keys
- Swapping fields (e.g., entering a first name in the last name field)
- Using nicknames instead of full names
- Misunderstanding a question
- Hearing incorrect information

- Transcription errors, such as misreading handwriting

Incomplete Identifying Information

Incomplete client identifying information—particularly name, Social Security Number (SSN), and date of birth—can significantly hinder the Alliance's ability to accurately determine unique clients, match client records, and provide an unduplicated count of clients and households. Without sufficient identifying data, it's impossible to confirm whether two records belong to the same client, which may result in an inflated or deflated client count. For example, if two clients have the same name but only one has an SSN recorded, the HMIS staff might mistakenly assume they are the same person. An SSN would clarify that they are, in fact, different individuals.

For homeless families, it's also essential to assign a unique Household Identifier to link all family members together in analyses. If this identifier is missing, accurate counts of families served will be impossible, and family composition data will be unreliable. Each family member might be counted as an individual rather than as part of a family unit. While the Household Identifier is typically system-generated, it is crucial that staff enter clients correctly to ensure the proper linkage of family members.

Where possible, staff should document third-party verification sources provided for client information. Clients should also be granted the opportunity to review and correct any personal information entered into HMIS, in line with the HUD Data and Technical Standards.

Data Integrity Standards:

To ensure maximum data accuracy and completeness, the following standards have been established:

- All clients must have a unique ID number, either a Social Security Number or a system-generated ID.
- Missing or unknown data in required fields should be less than 10% per month. The only exception to this rule is the Destination field.
- All data entered into HMIS must be consistent with the agency's program requirements in Clarity. For example, a family cannot be entered into a single men's or women's shelter.
- Data entered into HMIS must accurately reflect the information recorded in the agency's client file. For instance, the Entry Date should correspond to the date the client enrolled and began receiving services, and the Exit Date should correspond to the date the client physically exited the program.
- Active client data should be reviewed and updated on a monthly basis.

- Each agency program must establish procedures, controls, and audit trails to ensure all client information is entered into Clarity.

Approaches to Ensuring Consistency in Data Completion:

1. Software Validation:

Software validation ensures that records cannot be saved unless all required fields are completed. This method is effective in ensuring every field is filled out, but it may encourage staff to enter inaccurate information just to save the data.

2. Data Quality Reporting:

Data quality reporting occurs after the fact. Reports highlighting missing or questionable data are generated, prompting staff to review and correct records or fill in missing information.

Data Consistency

Consistency in data collection and entry refers to having a shared understanding of what data needs to be collected and how it should be entered. Agencies must refer to the HUD Data Standards for a complete description of each data element.

Much of the data in HMIS is self-reported by individuals seeking homeless services. Due to the vulnerable position of homelessness, clients may unintentionally or intentionally provide incorrect information for various reasons. Inaccurate information can be minimized by building rapport with the client. Many clients may not understand the critical connection between their data and the funding or services they receive. Clearly communicating why their information is being collected, how it will be used, and how it supports the agency in securing and sustaining funding can help the client understand and feel more comfortable providing accurate information.

It is recommended that all staff align on a minimum standard of information that every client should receive. Agencies may want to create talking points or provide training to staff on how to consistently explain the HMIS and data collection process.

Entering Data

Ideally, the same person who collects HMIS data should also enter that data into Clarity. This ensures consistent interpretation of the questions, answers, and handwritten notes. However, in many service agencies, it is not always feasible for one person to perform both tasks, such as when day shift staff collect the data, and night shift staff enter it when things are less hectic. Additionally, those who are skilled at interviewing clients may not be as adept at entering data, or vice versa.

When it is not possible for the same person to collect and enter data, a clear process and

regular communication between intake and data entry staff is crucial. This will help minimize any misinterpretations. Staff members responsible for these tasks should meet before they begin working and check in regularly to address any issues related to notes on the intake form. They should agree on shorthand usage, clarify any confusing questions, and resolve any other concerns. Keeping a data quality log to track unresolved questions can be a helpful tool. Supervisors should ensure this communication happens consistently at each agency

Ongoing Training for Staff

Ongoing training in Clarity is essential for data entry staff to ensure the continued quality of the data. The frequency of training may vary depending on software changes, updates, and the overall complexity of the system. It also depends on the skill levels of the users. Staff who are less comfortable with computers in general should consider refresher trainings to identify potential mistakes and confirm correct usage. All staff members will benefit from deeper, more detailed training on the software. HMIS Lead Agency will conduct at least one data quality-focused training session annually.

Monitoring

Monitoring data quality is crucial for the success of HMIS. All participating agencies are required to develop protocols for monitoring the quality of the data entered into HMIS system.

Accountability

Each agency that participates in HMIS will be held accountable for following all HUD regulations related to HMIS, including privacy standards and data quality.

Universal Data Elements

The Universal Data Elements define the basic data collection requirements for all homeless housing and service providers entering data into the Homeless Management Information System (HMIS). These elements form the foundation for generating unduplicated estimates of the number of homeless individuals accessing services, as well as basic demographic information and patterns of service use, such as shelter stays and homelessness episodes over time. These data elements are required to be collected by all projects participating in the Bakersfield-Kern HMIS, regardless of funding source.

The required Universal Data Elements include:

- Name
- Social Security Number
- Date of Birth

- Race
- Ethnicity
- Gender
- Veteran Status
- Disabling Condition
- Project Start Date
- Project Exit Date
- Destination
- Relationship to Head of Household
- Client Location
- Housing Move-In Date (for all permanent housing project types)
- Living Situation

Program Specific Data Elements

The Universal Data Elements (UDEs) are essential for ensuring that all service providers in the Kern County Homeless Management Information System (HMIS) collect the necessary data to produce an unduplicated count of clients served across the Continuum of Care (CoC). This data is crucial for various reporting requirements, including the Annual Performance Report (APR) and Longitudinal System Analysis (LSA) required by the U.S. Department of Housing and Urban Development (HUD), among others. Additionally, it ensures the CoC has enough data to analyze the populations they serve, including their characteristics and service usage.

Providers enter UDEs during the Entry Assessment, which follows the submission of the client's Entry information. This includes details such as which household members are participating in the program, the Entry Type, and the Entry Date. The Entry Date should accurately reflect the client's participation in the program, whether it's their intake assessment, receipt of services, outreach by program staff, or a night of shelter.

Likewise, providers enter specific data elements during the Exit Assessment once the client completes or leaves the program. This assessment is available after the provider indicates which household members are leaving, the reason for leaving, the destination, and the Exit Date. The Exit Assessment should be completed on the client's final day in the program, capturing the most relevant and accurate data.

HUD regularly evaluates the community's collection of UDEs, so it is vital that all clients who receive services have complete data for all required elements.

The required Program Specific Common Data Elements include:

- Income and Sources
- Non-Cash Benefits
- Health Insurance

- Physical Disability
- Developmental Disability
- Chronic Health Condition
- HIV/AIDS
- Mental Health Problem
- Substance Abuse
- Domestic Violence
- Contact (for Supportive Services Only, Emergency Shelter NBN, and Street Outreach project types)
- Date of Engagement (for Supportive Services Only, Emergency Shelter NBN, and Street Outreach project types)
- Bed-Night Date (for Emergency Shelter NBN project types)
- Housing Assessment Disposition (for Coordinated Assessment project types)

Individual Federal Partner Program Data Elements

Federal Partner Program Elements are specific data elements maintained by a partner agency and shared with others. When combined with the Universal Data Elements and Common Elements, they form the foundation of data collection for project-level reporting generated by the Homeless Management Information System (HMIS). These elements are organized by Federal Partner Program as follows:

HUD - CoC Program Elements

- Housing Assessment at Exit (applicable to Homelessness Prevention project types)

HUD - ESG Program Elements

- Housing Assessment at Exit (applicable to Homelessness Prevention project types)

HUD - HOPWA Program Elements

- Services Provided - HOPWA
- Financial Assistance Provided - HOPWA (applicable to PHP and STRMU project types)
- Medical Assistance
- T-cell (CD4) and Viral Load
- Housing Assessment at Exit

HHS - PATH Program Elements

- Services Provided - PATH Funded
- Referrals Provided - PATH
- PATH Status
- Connection with SOAR

RHY Program Elements

- Referral Source (not applicable to Street Outreach project types)

- RHY:BCP Status (applicable to BCP-es and BCP-p project types)
- Sexual Orientation
- Last Grade Completed (not applicable to Street Outreach project types)
- School Status (not applicable to Street Outreach project types)
- Employment Status (not applicable to Street Outreach project types)
- General Health Status (not applicable to Street Outreach project types)
- Dental Health Status (not applicable to Street Outreach project types)
- Pregnancy Status
- Formerly a Ward of Child Welfare/Foster Care Agency (not applicable to Street Outreach project types)
- Formerly a Ward of Juvenile Justice System (not applicable to Street Outreach project types)
- Family Critical Issues (not applicable to Street Outreach project types)
- RHY Service Connections (not applicable to Street Outreach project types)
- Commercial Sexual Exploitation/Sex Trafficking
- Labor Trafficking
- Project Completion Status (applicable to BCP-es, MGH, TLP, and DEMO project types)
- Counseling (not applicable to Street Outreach project types)
- Safe and Appropriate Exit (not applicable to Street Outreach project types)
- Aftercare (not applicable to Street Outreach project types)

VA Program Elements

- Veteran's Information
- Services Provided - SSVF (required for SSVF project types)
- Financial Assistance - SSVF (applicable to SSVF project types)
- Percent of AMI (SSVF Eligibility) - SSVF (applicable to SSVF project types)
- Last Permanent Address (applicable to SSVF project types)
- VAMC Station Number (applicable to SSVF project types)
- SSVF HP Targeting Criteria (applicable to SSVF HP project types)
- Connection with SOAR (applicable to SSVF project types)
- Last Grade Completed (applicable to SSVF project types)

HUD - VASH Program Elements

- Veteran's Information
- Last Permanent Address
- VAMC Station Number
- HUD-VASH Voucher Tracking (applicable to HUD/VASH-OTH project types)
- HUD-VASH Exit Information (applicable to HUD/VASH-OTH project types)
- Last Grade Completed
- Employment Status (applicable to HUD/VASH-OTH project types)
- General Health Status (applicable to HUD/VASH-OTH project types)

These program-specific elements are crucial for tracking and reporting on the services provided to individuals in these specialized programs. They ensure data consistency across federal partner programs and help meet the reporting requirements of each respective agency.

Data Quality Components

Timeliness

Entering data into the Homeless Management Information System (HMIS) promptly is crucial for minimizing human error and ensuring the data remains accurate and reliable. Timely data entry makes the information accessible when needed for monitoring, funding requirements, responding to requests, or other purposes.

To support timely data entry, the following deadlines are set for different project types:

- **Emergency Shelter projects:** All Universal Data Elements and Program Specific Data Elements must be entered within 3 to 10 days of project entry and exit.
- **Transitional Housing and Permanent Housing projects** (including Rapid Re-housing): All Universal Data Elements and Program Specific Data Elements must be entered within 3 days of project entry and exit.
- **Supportive Service Only projects:** All Universal Data Elements and Program Specific Data Elements must be entered within 3 days of project entry and exit.
- **Prevention projects:** All Universal Data Elements and Program Specific Data Elements must be entered within 3 days of project entry and exit.
- **Street Outreach projects:** All Universal Data Elements and Program Specific Data Elements must be entered within 3 to 10 days of engagement with the client.

These deadlines help ensure that data is recorded accurately and in a timely manner, supporting efficient service delivery and compliance with reporting requirements.

Completeness

Complete HMIS data is essential for understanding the demographics and service usage of individuals accessing homeless housing and services within the community. Having full data allows for accurate reporting and analysis on the scope and nature of homelessness, including:

- Unduplicated counts of persons served
- Patterns of individuals entering and exiting the homeless assistance system
- Evaluation of the effectiveness of the community's homeless assistance system

Complete data is crucial for the Continuum of Care (CoC) to meet funding compliance requirements and ensure that individuals in the homeless assistance system receive the

necessary services to secure and maintain permanent housing. As such, all projects using HMIS must enter data for 100% of clients served.

While achieving 100% data entry may not always be possible, the CoC has set a standard that 90% data completeness is the minimum acceptable rate. This threshold ensures that the CoC meets HUD and other Federal Partner funding compliance requirements and remains eligible to participate in the Annual Homeless Assessment Report.

Accuracy

Data accuracy refers to how well the information entered HMIS represents the real, correct information about the clients served and the services provided. Ensuring data accuracy requires both the clients' ability to provide accurate information and the intake worker's ability to document and enter this information correctly.

Since there is no standardized baseline for clients' accurate information and data accuracy can be hard to measure directly, each agency is encouraged to establish its own monitoring processes. Here are recommended steps for ensuring data accuracy in HMIS:

Recommended Steps for Monitoring Data Accuracy:

- **Establish a Process for Error Reporting and Correction**
Agencies should set up a straightforward process for HMIS users to report and correct any errors they discover in the data. This will ensure that inaccuracies are quickly identified and addressed.
- **Promote Accurate Data Collection**
Emphasize to both clients and intake staff that when unsure of information, it's better to enter "client doesn't know" or "data not collected" rather than risk entering inaccurate data.
- **Client Access for Review and Correction**
Provide clients with the opportunity to review and correct their personal information in the HMIS system. This ensures that clients have input into their own data and can help catch errors.
- **Verify Basic Identifying Information**
Ensure that clients' first and last names are spelled correctly and that dates of birth are accurately recorded. When possible, cross-check this information against clients' identification documents to confirm accuracy.

Tools to Support Data Accuracy Monitoring:

- **Data Accuracy Dashboard**
Agency Voting Member should regularly review the Data Accuracy Dashboard in HMIS to track accuracy issues and ensure that the data is being entered correctly.

- **Data Quality Corrections Report**

Agency Voting Members should also review the Data Quality Corrections Report which flags data issues that need to be addressed.

By following these steps and utilizing these tools, agencies can establish a strong process for monitoring and improving the accuracy of the data entered into HMIS, ensuring that the information reflects the reality of the clients served and the services provided.

Data Quality Monitoring and Reporting Process

Data Quality Review Process for Bakersfield-Kern HMIS

To maintain high data quality within the Bakersfield-Kern HMIS, clear responsibilities need to be assigned to Participating Agencies and HMIS Lead/System Administrators. This process should be conducted monthly to ensure continuous improvement. Below are the steps and actions involved:

Step 1: KHS Sends Data Quality Corrections to Participating Agencies

- KHS will generate the Data Quality Report for all active projects in the Bakersfield-Kern HMIS for the previous month and send out every 15th of the month.
- KHS will send the Data Quality Report to participating agencies which flags data completeness and accuracy errors related to the Universal Data Elements (UDEs) for active client enrollments during the previous month.

Step 2: Agencies Correct Missing Data/Errors in HMIS

- Agencies will review the Data Quality Report and address any missing data or errors. They should make the necessary corrections to the clients' enrollments in HMIS based on the flagged issues.
- Agencies should refer to the Data Quality Corrections Reference Guide, which provides:
 - Descriptions of the identified data quality errors.
 - Instructions on how to correct the data issues.

Key Points:

- This month review and correction process ensures that data errors are identified and corrected promptly, maintaining the integrity of the data in the system.
- By following this process, the Bakersfield-Kern HMIS ensures the data used for analysis, reporting, and funding requirements is as accurate and complete as possible.

- This structured approach enhances data completeness and accuracy, benefiting program operations and the broader community's ability to address homelessness effectively.

Utilizing Additional Data Quality Reports and Tools

To prepare for the data quality monitoring and reporting process, Agency Voting Members should leverage the additional reports and tools provided by KHS. These resources are designed to help agencies assess and improve the data quality in their projects.

Key Resources:

- **Data Quality Reports:** These reports provide a detailed overview of data completeness and accuracy errors, specifically flagging issues related to the Universal Data Elements (UDEs).
- **Data Quality Tools:** These tools help track data quality performance and support the necessary corrections based on the feedback from the reports.

By regularly reviewing these tools and reports, Agency Voting Members can ensure their projects maintain high data quality standards, ensuring that the data is accurate, reliable, and ready for reporting and analysis. This process ultimately supports more effective homelessness solutions and better program outcomes.

Timeliness Reports for HMIS

Timeliness reports are essential tools that allow Homeless Services Providers to track and evaluate how efficiently they are recording intake, exit, and service information in HMIS. These reports provide insights into the amount of time it takes to enter critical client data, ensuring that data is available when needed for analysis and reporting.

It is recommended that these reports be reviewed monthly. The following Timeliness Reports can be found on the Reports Page in HMIS, under the Data Analysis tab, within the Data Quality section:

1. Project Start Data Timeliness Report

- **Purpose:** This report tracks the number of days it takes to record Project Start data into HMIS for each client enrollment.
- **What It Shows:** The report indicates the duration between when a client is enrolled and when their Project Start data is entered into the system.
- **Why It's Important:** Timely recording of the Project Start ensures that the program can effectively track the client's progress and access timely services.

2. Services Data Timeliness Report

- **Purpose:** This report monitors how many days it takes to record Services data into HMIS for each client enrollment.
- **What It Shows:** The report provides information on the length of time between service delivery and data entry.
- **Why It's Important:** Accurate and timely recording of services is crucial for tracking client needs and ensuring service continuity. It helps to assess if services are being delivered within expected timeframes.

3. Project Exit Data Timeliness Report

- **Purpose:** This report tracks the number of days it takes to **enter Project Exit** data into HMIS for each client.
- **What It Shows:** It details the time between a client's exit from a program and the recording of their Project Exit data.
- **Why It's Important:** Timely exit data allows for accurate reporting and helps agencies track client outcomes, including housing stability and service completion.

Reviewing Timeliness Reports

Running and reviewing these reports monthly will help agencies identify areas where data entry is delayed, allowing for corrective action to be taken. Timeliness in data entry is essential for meeting funding requirements, ensuring accurate reporting, and supporting effective decision-making within the homeless assistance system.

By regularly assessing and improving timeliness, agencies can enhance the quality and accessibility of their data, which supports a more efficient response to homelessness.

HUD Reports

Annual Homeless Assessment Report/Longitudinal System Analysis (AHAR/LSA)

The AHAR/LSA is a report submitted by HUD to the U.S. Congress that provides nationwide estimates of homelessness. It includes information on the demographic characteristics of homeless individuals, their service usage patterns, and the capacity to house homeless people. The reporting period for the AHAR/LSA spans from October 1 to September 30.

Preparation and Submission Schedule:

- **Throughout the Year:**
 - Kern Health Systems will conduct monthly data quality and utilization rate reviews and submit reports to agencies for correction.
- **One Month Before Draft Submission Due Date:**

- Kern Health Systems will generate draft reports, identify any issues or discrepancies from the previous year, and notify agencies as necessary.
- Agencies will review data with relevant program managers and/or staff to ensure accuracy and verify that the data matches other client records.
- **On Draft Submission Due Date:**
 - The CoC will enter data into the HUD Data Exchange (HDX) and resolve any validation issues as needed.
- **On Final Data Submission Due Date:**
 - Kern Health Systems will review the draft data with the CoC Lead Entity staff and obtain approval for submission. Once approved, the final data will be confirmed and submitted in HDX.

This structured process ensures the accurate and timely submission of data to meet HUD's AHAR/LSA reporting requirements.

Annual Performance Report (APR)

The APR is a required report that provides detailed performance data for grants under the CoC and ESG programs. It must be submitted within 90 days of the operating end of the grant.

Preparation and Submission Schedule:

- **Two (2) Months Before Due Date:**
 - Agencies will begin data quality reviews, focusing on verifying that the correct number of clients are enrolled and ensuring there are no missing or incomplete values (e.g., null, "don't know," or "refused" values).
 - Any necessary corrections will be made in HMIS.
- **One (1) Month Before Due Date:**
 - Agencies will review data with relevant program managers or staff to ensure the accuracy of the data compared to other records. Any discrepancies or errors will be addressed and corrected in HMIS.
- **Three (3) Weeks Before Due Date:**
 - Agencies will conduct an internal review of the data in HMIS, ensuring all data is accurate before uploading it into the Sage system.
- **Two (2) Weeks Before Due Date:**
 - Agencies will upload the finalized APR data into Sage, ensuring it is ready for submission.

This process ensures that the APR is completed accurately and submitted on time to meet the funding and reporting requirements for HUD grants.

System Performance Measures (SPMs)

HUD's System Performance Measures (SPMs) are used to assess the effectiveness of the local homeless response system as a coordinated whole, rather than focusing on individual projects and funding sources. These measures help HUD evaluate the performance of a CoC's homeless assistance system, and the information is used as a competitive element in the annual CoC Program Competition. SPM data is also used to gauge the national state of the homeless response system. The reporting period for SPMs is from October 1 through September 30.

Preparation and Submission Schedule:

- **Three (3) Months Before Data is Due to HUD:**
 - Kern Health Systems will begin a system-wide data quality review and notify agencies about any issues or discrepancies.
 - Agencies will start their own data quality review, ensuring that the correct number of clients are enrolled and addressing any missing, null, or incomplete data (e.g., "don't know" or "refused" values). Corrections will be made in HMIS as needed.
- **Two (2) Months Before Data is Due to HUD:**
 - Kern Health Systems will run draft reports, identify issues or discrepancies from the previous year, and notify agencies as needed.
 - Agencies will review the data with relevant program managers or staff to verify accuracy and ensure it aligns with other client records. Any discrepancies will be addressed, and the data will be corrected in HMIS.
- **Two (2) Weeks Before Data is Due to HUD:**
 - The CoC will enter data into the HUD Data Exchange (HDX) and resolve any validation issues.
 - The final data will be reviewed with the CoC Lead Entity staff to ensure accuracy before submitting the final report to HUD.

This detailed schedule ensures that the data for the System Performance Measures is accurate, complete, and submitted in a timely manner to meet HUD's reporting requirements.

Homeless Information Collection (HIC) Report

The HIC is a comprehensive snapshot of the inventory of beds and housing available for people experiencing homelessness on a single night. It provides a snapshot of the homeless assistance system, including emergency shelter, transitional housing, permanent supportive housing, and other bed types. The data helps HUD assess the capacity of the local homeless response system and track trends over time.

Preparation and Submission Schedule for HIC Report:

- **Three (3) Months Before Data is Due to HUD:**
 - Kern Health Systems will begin a system-wide review of available bed data for the HIC and notify agencies about any discrepancies or missing data related to bed types, capacity, or locations.
 - Agencies will begin reviewing their own bed inventory data, ensuring that all bed types are accurately represented, and that capacity information is up to date. Any missing, null, or incomplete data will be flagged and corrected in the HMIS system.
- **Two (2) Months Before Data is Due to HUD:**
 - Kern Health Systems will run draft reports for the HIC and identify any discrepancies compared to the previous year's data. Any issues with bed capacity or missing data will be flagged.
 - Agencies will verify the accuracy of bed inventory data with program managers and relevant staff. They will cross-check bed counts with local data sources and records to ensure consistency. Corrections will be made in the HMIS system as needed.
- **Two (2) Weeks Before Data is Due to HUD:**
 - The CoC will enter the finalized bed inventory data into the HUD Data Exchange (HDX) and resolve any validation issues that may arise.
 - Final review of the bed data will be conducted with the CoC Lead Entity staff to ensure its accuracy and completeness.

The final HIC report will be submitted to HUD before the deadline.

Point-in-Time (PIT) Count Report

The PIT count is a critical tool for assessing the number of people experiencing homelessness on a single night. It is a snapshot taken during the last 10 days of January each year and counts both sheltered and unsheltered homeless individuals. The data collected in the PIT count is essential for tracking trends in homelessness and is used by HUD for national and local policy decision-making.

Preparation and Submission Schedule for PIT Count Report:

- **Three (3) Months Before Data is Due to HUD:**
 - Kern Health Systems will begin a system-wide review of the PIT count process, including ensuring that agencies have the necessary procedures in place for counting both sheltered and unsheltered homeless individuals.
 - Agencies will begin reviewing their own PIT count procedures, including outreach efforts for counting unsheltered individuals, verifying their local methodology, and ensuring proper data collection processes are in place.

- Any missing or incomplete data (such as individuals not counted or discrepancies in shelters or counts) will be flagged and corrected in HMIS.
- **Two (2) Months Before Data is Due to HUD:**
 - Kern Health Systems will run draft PIT count reports and identify discrepancies from the previous year's data. This includes comparing trends in the number of homeless individuals counted both in shelter and in unsheltered conditions.
 - Agencies will work to verify the accuracy of the PIT count by cross-checking with local shelters, outreach teams, and relevant staff. Any discrepancies in the count will be addressed, and corrections will be made to the HMIS system.
- **Two (2) Weeks Before Data is Due to HUD:**
 - The CoC will finalize the PIT count data, entering the results into the HUD Data Exchange (HDX).
 - Final review of the PIT count data will be conducted with the CoC Lead Entity staff to ensure accuracy and consistency.

The final PIT count report will be submitted to HUD before the deadline.

Incentives and Enforcement

Ensuring timely, complete, and accurate data entry into HMIS is vital for the success of the Continuum of Care (CoC) and its efforts to monitor and improve homeless services. This data helps with funding compliance, program evaluation, and meeting the needs of those in the homeless assistance system. The CoC depends on consistent data for understanding the scope and effectiveness of services and to ensure that people in the system receive the necessary support to secure permanent housing.

To ensure that all participating agencies meet the minimum data entry standards, the following incentives and enforcement protocols are in place:

1. Public Availability of Data Quality Plan

- A copy of the Data Quality Plan will be made publicly available on the HMIS Lead's website.

2. Data Quality Reports

- The HMIS Lead will provide data quality reports to participating agencies according to the monitoring schedule to help them comply with data entry standards.

3. Recognition for Meeting Data Quality Benchmarks

- Agencies that consistently meet the data quality benchmarks will be periodically recognized by the CoC for their efforts.

4. Notification of Deficiencies

- Agencies that fail to meet the minimum data entry standards will be notified of the deficiencies and provided with specific guidance on how to correct the issues.

- Agencies will be given one month to correct identified data quality issues.

5. Public Access to Data Quality Reports

- The HMIS Lead Agency will make revised data quality reports available to the public upon request.

6. Training for Noncompliant Agencies

- Training will be offered to agencies that remain noncompliant with the minimum standards.
- Agencies that continue to be noncompliant may have their HMIS access suspended until they demonstrate compliance.

7. Aggregate Data Quality Reports

- Aggregate data quality reports from HMIS will be available to the public upon request.

8. Subcommittee Updates

- The HMIS Data Quality Subcommittee will provide regular updates on progress toward meeting data quality benchmarks at CoC meetings.

9. Corrective Action Plans for Noncompliant Agencies

- Agencies that fail to meet data quality benchmarks may be asked to submit a corrective action plan outlining steps to improve. This plan will be reviewed and monitored by the HMIS Data Quality Subcommittee.
- If the problem persists, the HMIS Data Quality Subcommittee may recommend suspending the agency's ability to enter data into HMIS and will notify relevant state and federal funders.

This protocol ensures that data quality remains a priority and that participating agencies are supported to meet standards, with appropriate measures taken if data quality issues persist.