



# Homeless Services Department

## HMIS Data Quality & Monitoring Plan

Updated April, 2025

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# 1 Introduction

- The Homeless Services Department (HSD) is a department within Multnomah County. HSD was formerly referred to as the Joint Office of Homeless Services (JOHS). The name of the Department changed in 2025.
- HSD is the Lead Agency (“HMIS Lead”) of the Homeless Management Information System (HMIS) for Portland, Gresham & Multnomah County.
- HMIS is a locally administered electronic system that stores client-level information about persons who access homeless services in a community.
- The alphanumeric code HUD uses to identify our Continuum of Care (CoC) is “OR-501”.
- Multnomah County’s CoC Board designates HSD as the HMIS Lead.
- Part of the responsibilities of the HMIS Lead is to develop, maintain and implement a Data Quality & Monitoring Plan.
- This document includes a Data Quality (DQ) Plan and protocols for ongoing data quality monitoring that meet requirements set forth by the Department of Housing and Urban Development (HUD).
- HSD’s Data Team developed, implements and maintains this plan. Successful implementation requires the active partnership of internal and external stakeholders.
- This HMIS Data Quality Plan is to be updated annually, and in accordance with the latest HMIS Data Standards (including quality thresholds) and local requirements.

## 1.1 Foundation

HMIS data standards have been established by the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services (HHS), and the U.S. Department of Veterans Affairs (VA) to allow for standardized data collection on individuals and families experiencing homelessness across systems.

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

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

*([FY2024 HMIS Data Standards Manual](#))*

In addition to these HUD standards, the local CoC also has standards tied to contractual outcomes and outputs.

Every two years, HUD updates national HMIS Data Standards. The HSD Data Team will update this plan to reflect updates to national standards.

## 1.2 What is DQ and Why Does it Matter?

Data Quality is a term that refers to the reliability and validity of client-level data collected in HMIS. It is measured by the extent to which the client and other data in the system reflect actual information in the real world. With good data quality, the local CoC can “tell the story” of the population experiencing homelessness. The quality of data is determined by assessing certain characteristics such as timeliness, completeness, and accuracy.

Quality data within HMIS is an integral part of the work to end homelessness because it:

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

## 1.3 What is a DQ Plan

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

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

## 1.4 What is a DQ Monitoring Plan

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

# 2 Data Quality Plan

## 2.1 Purpose

This plan provides an actionable set of steps to address systemwide data quality within Multnomah's HMIS.

## 2.2 Overview

This plan:

- Identifies standard HMIS data collection requirements
  - All HMIS-participating organizations that enter data into HMIS must follow these requirements.
- Explains data quality benchmarks set forth for required data.
- Describes the various components of data quality
  - Completeness
  - Timeliness
  - Accuracy
  - Consistency
  - Coverage
  - Utilization
- Identifies how data quality will be monitored

## 2.3 Participation

All federally funded homeless services projects are required to use HMIS and must meet certain data quality expectations to ensure accurate reporting for those grants. All providers that enter data into the HMIS contribute to the overall picture of homelessness in the local area. All projects and programs entering data into HMIS, regardless of funding source, are required to provide data consistent with these standards.

## 2.4 HMIS Data

### 2.4.1 Universal Data Elements (UDE)

UDE collection enables government agencies to measure and report on system performance. Examples of such reports include:

- Local Reports
  - HSD System Performance Report
  - Supportive Housing Services Quarterly Report
  - Ad hoc reports and analyses
- HUD Reports
  - Point in Time Count
  - Annual Performance Report (APR)
  - Longitudinal System Analysis (LSA)
  - System Performance Measures (SPM)

### 2.4.1.1 UDE Collection

- All UDEs must be collected by all participating agencies. Please see the table below for a list of UDEs, the people and times for which they are collected and other important details.
- For all “lookup” questions, intake forms must contain the exact values indicated below.
- Any questions indicating “Omit from intake forms” identify data that users must enter into the system, but can answer without prompting the participant.
- Participants should self-report answers to all questions.

UDE Field	Collected for	Collection Point
<b>First Name</b>	All clients	Record Creation
<b>Last Name</b>	All clients	Record Creation
<b>Name Data Quality</b> - Omit from intake forms.	All clients	Record Creation
<b>SSN Data Quality</b> - Omit from intake forms. Select “Data not collected (HUD)” in HMIS	All clients	Record Creation
<b>US Military Veteran?</b> ( <i>lookup question</i> ) <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> <li>• Client doesn’t know</li> <li>• Client prefers not to answer</li> </ul>	All clients	Record Creation
<b>Date of Birth</b>	All clients	Entry Assessment
<b>DoB Data Quality</b> - Omit from intake forms.	All clients	Entry Assessment
<b>Relationship to Head of Household</b> ( <i>lookup question</i> ) <ul style="list-style-type: none"> <li>• Self (head of household)</li> <li>• Head of household’s child</li> <li>• Head of household’s spouse or partner</li> <li>• Head of household’s other relation member (other relation to head of household)</li> <li>• Other: non-relation member</li> </ul>	All clients	Entry Assessment
<b>Race &amp; Ethnicity</b> ( <i>lookup question</i> ) ~ <i>Select all the apply</i> ~ <ul style="list-style-type: none"> <li>• American Indian, Alaska Native, or Indigenous</li> <li>• Asian or Asian American</li> <li>• Black, African American, or African</li> <li>• Hispanic/Latina/e/o</li> <li>• Middle Eastern or North African</li> <li>• Native Hawaiian or Pacific Islander</li> <li>• White</li> <li>• Client doesn’t know</li> <li>• Client prefers not to answer</li> <li>• Additional Race and Ethnicity Detail (<i>write in</i>)</li> </ul>	All clients	Entry Assessment

UDE Table Cont’d on next page

UDE Field	Collected for	Collection Point
<b>Gender</b> ( <i>lookup question</i> ) ~ Select all the apply ~ <ul style="list-style-type: none"> <li>● Woman (Girl, if child)</li> <li>● Man (Boy, if child)</li> <li>● Culturally Specific Identity (e.g., Two-Spirit)</li> <li>● Transgender</li> <li>● Non-Binary</li> <li>● Questioning</li> <li>● Different Identity</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> <li>● If Different Identity, please specify (<i>write in</i>)</li> </ul>	All clients	Entry Assessment
<b>Does the client have a disabling condition?</b> ( <i>lookup question</i> ) <ul style="list-style-type: none"> <li>● No</li> <li>● Yes</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	All clients	Entry Assessment
<b>Enrollment CoC</b> Omit from intake forms. Select "OR-501..." in HMIS	All clients	Entry Assessment
<b>Prior Living Situation</b> ( <i>lookup question</i> ) See table 1 below for lookup options.	Adults	Entry Assessment
<b>Length of Stay in Previous Place</b> ( <i>lookup question</i> ) <ul style="list-style-type: none"> <li>● One night or less</li> <li>● Two to six nights</li> <li>● One week or more, but less than one month</li> <li>● One month or more, but less than 90 days</li> <li>● 90 days or more, but less than one year</li> <li>● One year or longer</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	Adults	Entry Assessment
<b>On the night before did you stay on the streets, emergency shelter or safe haven?</b> ( <i>lookup question</i> ) <ul style="list-style-type: none"> <li>● No</li> <li>● Yes</li> </ul>	Adults	Entry Assessment
<b>Approximate date this episode of homelessness started</b>	Adults	Entry Assessment

UDE Table Cont'd on next page

UDE Field	Collected for	Collection Point
<b>Regardless of where they stayed last night, number of times the client has been on the streets, in shelter, or safe haven in the past three years including today</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● One time</li> <li>● Two Times</li> <li>● Three times</li> <li>● Four or more times</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	Adults	Entry Assessment
<b>Total number of months homeless on the street, in shelter or safe haven in the past three years</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● One month (this time is the first month)</li> <li>● Months ranging from 2-12 (choose the appropriate number of months)</li> <li>● More than 12 months</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	Adults	Entry Assessment
<b>Project Start Date</b>	All clients	Project Start
<b>Project Exit Date</b>	All clients	Project Exit
<b>Destination</b> <i>(lookup question)</i> <i>See table 1 below for lookup options.</i>	All clients	Project Exit

#### 2.4.1.2 Additional Notes on UDEs

- Race & Ethnicity and Gender both allow for multiple selections.
- The following questions are part of the data “element” collectively referred to as Prior Living Situation in HUD documentation:
  - Length of Stay in Previous Place
  - On the night before did you stay on the streets, emergency shelter or safe haven?
  - Approximate date this episode of homelessness started
  - Regardless of where they stayed last night, number of times the client has been on the streets, in shelter, or safe haven in the past three years including today
  - Total number of months homeless on the street, in shelter or safe haven in the past three years

*These additional questions are conditional based upon answers to the actual Prior Living Situation question. See the flow charts for Prior Living Situation in the [HMIS Data Standards Manual](#) for more information on which questions are required in which situations. As of this writing, the flow charts can be found on pages 73 & 74.*

- Fields for Middle Name and Alias also exist in the system and are available for use. However, they are not required so are not mentioned above.

## 2.4.2 Program Specific Data Elements (PSDE)

PSDEs provide information about the characteristics of clients, services provided and client outcomes.

See the table below for a list of all PSDEs.

PSDEs may differ by project type or federal funding source. For federally funded programs, see the latest HMIS Data Standards Manual for more information on which PSDEs are required. The HMIS Data Standards Manual can be found [here](#).

The table below includes the “Common Program Specific Data Elements”, which are the PSDEs that are collected across most Federal Partner and local programs.

### 2.4.2.1 Collection

PSDEs may be collected at:

- Project start
- Interim update
- Annual assessment
- Project exit
- The occurrence of a given event

**Some PSDEs are only required for certain projects.** See the section below called “2.4.2.2 Additional Notes on PSDEs” for more info.

PSDE Field	Collected for	Collection Point
<b>Housing Move-in Date (HMID)</b>	All Clients	Entry Assessment, Interim Update
<b>Non-Cash Benefits from any source</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● Yes</li> <li>● No</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	Adults	Entry Assessment, Interim Update, Annual Assessment, Project Exit
<b>Source of Non-Cash Benefit</b> <i>(lookup question)</i> ~ Select all the apply ~ <ul style="list-style-type: none"> <li>● Supplemental Nutrition Assistance Program (Food Stamps)</li> <li>● TANF Child Care Services</li> <li>● TANF Transportation Services</li> <li>● Other TANF Funded Services</li> <li>● Other Source</li> </ul>		
<b>If Other, Please Specify</b> <i>(write in)</i> <b>Amount of Non-Cash Benefit</b> <i>(write in)</i>	Adults	Entry Assessment, Interim Update, Annual Assessment, Project Exit

*PSDE Table Cont'd on next page*

PSDE Field	Collected for	Collection Point
<b>Income from Any source</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● Yes</li> <li>● No</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	Adults	Entry Assessment, Interim Update, Annual Assessment, Project Exit
<b>Source of Income</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● Alimony or Other Spousal Support</li> <li>● Child Support</li> <li>● Earned Income</li> <li>● General Assistance</li> <li>● Other</li> <li>● Pension or retired income from another job</li> <li>● Private Disability Insurance</li> <li>● Retirement Income from Social Security</li> <li>● Self Employment Wages</li> <li>● SSDI</li> <li>● SSI</li> <li>● TANF</li> <li>● Unemployed Insurance</li> <li>● VA Non-Service Connected Disability Pension</li> <li>● VA Service Connected Disability Compensation</li> <li>● Workers Compensation</li> </ul>		
<b>If Other, Please Specify</b> <i>(write in)</i> <b>Monthly Amount</b> <i>(write in)</i>	Adults	Entry Assessment, Interim Update, Annual Assessment, Project Exit
<b>Covered by Health Insurance</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>● Yes</li> <li>● No</li> <li>● Client doesn't know</li> <li>● Client prefers not to answer</li> </ul>	All Clients	Entry Assessment, Interim Update, Annual Assessment, Project Exit

PSDE Table Cont'd on next page

PSDE Field	Collected for	Collection Point
<p><b>Health Insurance Type</b> <i>(lookup question)</i>  ~ Select all the apply ~</p> <ul style="list-style-type: none"> <li>● MEDICAID</li> <li>● MEDICARE</li> <li>● State Children’s Health Insurance Program</li> <li>● Veteran’s Health Administration (VHA)</li> <li>● Employer- Provided Health Insurance</li> <li>● Health Insurance obtained through COBRA</li> <li>● Private Pay Health Insurance</li> <li>● State Health Insurance for Adults</li> <li>● Indian Health Services Program</li> <li>● Other</li> </ul>	All Clients	Entry Assessment, Interim Update, Annual Assessment, Project Exit
<p><b>Disability Type</b> <i>(lookup question)</i>  ~ Select all the apply ~</p> <ul style="list-style-type: none"> <li>● Alcohol Use Disorder</li> <li>● Drug Use Disorder</li> <li>● Both Alcohol and Drug Use Disorder</li> <li>● Developmental Disability</li> <li>● HIV/AIDS</li> <li>● Mental Health Disorder</li> <li>● Physical Disability</li> <li>● Chronic Health Condition</li> </ul>	All Clients	Entry Assessment, Interim Update, Project Exit
<p><b>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently</b>  <i>(lookup question)</i></p> <ul style="list-style-type: none"> <li>● Yes</li> <li>● No</li> <li>● Client doesn’t know</li> <li>● Client Prefers not to answer</li> </ul>	All Clients	Entry Assessment, Interim Update, Project Exit
<p><b>Disability determination</b>  Omit from intake forms. See “Additional Notes on PSDEs” section below.</p> <ul style="list-style-type: none"> <li>● Yes</li> <li>● No</li> <li>● Client doesn’t know</li> <li>● Client Prefers not to answer</li> </ul>	All Clients	Entry Assessment, Interim Update, Project Exit

PSDE Table Cont’d on next page

PSDE Field	Collected for	Collection Point
<b>Survivor of Domestic Violence</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> <li>• Client doesn't know</li> <li>• Client Prefers not to answer</li> </ul>	Adults	Project Start, Interim Update
<b>If Yes for survivor of Domestic Violence, when experience occurred</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>• Within the past three months</li> <li>• Three to six months ago</li> <li>• From six to twelve months</li> <li>• More than a year ago</li> <li>• Client doesn't know</li> <li>• Client prefers not to answer</li> </ul>	Adults	Project Start, Interim Update
<b>If Yes for survivor of Domestic Violence, Are you currently fleeing?</b> <i>(lookup question)</i> <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> <li>• Client doesn't know</li> <li>• Client Prefers not to answer</li> </ul>	Adults	Project Start, Interim Update
<b>Current Living Situation</b>	Adults	Occurrence point (at time of contact)
<b>Date of Engagement</b>	Adults	Occurrence point (at point of engagement)
<b>Coordinated Entry Assessment</b>	Head of Household	Entry Assessment
<b>Coordinated Entry Event</b>	Head of Household	Interim Update

#### 2.4.2.2 Additional Notes on PSDEs

The following standards are generic for Multnomah County. Additional funder requirements may apply. Please check data collection requirements for specific funding streams.

- **Coordinated Entry Assessment** can be omitted from intake forms. However, this element involves multiple questions. As a result, programs conducting assessments for Coordinated Access may want to include these questions on an “Admin only” section of an intake packet for ease of collection.
- **Current Living Situation:** Only required for Street Outreach programs. Current Living Situation involves multiple questions. Ensure all questions are present on intake forms. Contact hmishelp@multco.us for further details on all Current Living Situation questions.
- **Date of Engagement:** Only required for Street Outreach programs.
- **Disability determination:** This question should receive a “yes” answer for any disabilities the participant identifies. Disability determination is a distinct field in the Disabilities sub-assessment but does not need to explicitly be included in intake forms.

- **Housing Move-in Date (HMID):** Only required for permanent housing programs.
- Certain homelessness prevention projects may be exempt from **Disability Type, Income, Insurance, Non-Cash Benefits and Domestic Violence**-related questions.
  - Send questions about this requirement to [hmishelp@multco.us](mailto:hmishelp@multco.us).
- The three questions around **Domestic Violence** are required for all project types *except* Street Outreach. Certain homelessness prevention projects may also be exempt.
- Always check with your funder to ensure that all data collection requirements are met.

### 2.4.3 Multnomah Specific Data Elements (MSDE)

#### 2.4.3.1 Purpose

The purpose of Multnomah Specific Data Elements is to provide accurate information about who is being served within our CoC to ensure equitable outcomes and appropriate distribution of public dollars. MSDEs are:

Field	Collected about	Collection Point
<b>Priority Population -</b> Omit from intake forms.	Head of Household	Entry Assessment

#### 2.4.3.2 Additional Notes on MSDEs

- The Priority Population question is required for all HSD-funded programming. In order to answer whether heads of household are members of Population A or B, programs must use the “Experiencing or at Imminent Risk of Long-Term Homelessness” form. This form is colloquially referred to by some as the “Pop A” form. This form should be included in program intake packets. Contact your MultCo HSD Program Specialist with questions.

### 2.4.4 Project Descriptor Data Elements (PDDE)

#### 2.4.4.1 Purpose

PDDEs are basic information about the projects participating in HMIS. PDDEs help ensure project information in HMIS is consistent and comprehensive. They enable HMIS to:

- Associate client-level records with the various projects in which clients will enroll in across project types
- Identify which federal/local partner programs are providing funding to the project
- Record bed and unit inventory and other information, by project. Bed & Unit inventories are relevant to the Longitudinal System Analysis (LSA), System Performance Measures (SPMs), Housing Inventory Count (HIC), Point In Time (PIT) Count, all of which are required by HUD. This information will be verified or updated at least annually for administrative reporting purposes.

The following PDDEs are required:

- Organization Identifier
- Project ID #
- Project Name
- Operating Start Date
- Operating End Date
- CoC Code
- Continuum of Care Project (yes/no)
- Project Type
- Housing Type (only required for site-based projects)
- Funding Sources
- Bed and Unit Inventory Information (As needed for Shelters/Annual for RRH and PH)
- HMIS Participation Status
- Coordinated Entry Participation Status

#### 2.4.4.2 Collection

- PDDEs are generally managed by the Data Team at HSD. However, certain agency administrators may also reference or update these. If you have questions about PDDEs, contact [hmishelp@multco.us](mailto:hmishelp@multco.us).
- PDDEs are created at initial project setup within HMIS, and project staff must work closely with HSD to review these at least once annually.
- Participating agencies must inform HSD staff of changes to Bed and Unit Inventory Information within 15 days of an inventory change to ensure accuracy of the monthly bed count report.
- Other PDDEs may be implemented as part of HSD ongoing efforts to improve integration of HMIS with other databases and systems of care. HSD staff will work with agencies to gather additional information as needed.

## 2.5 Defining Data Quality

### 2.5.1 Four Components of Data Quality

HUD identifies four components of data quality: timeliness, completeness, accuracy and consistency. These components are defined and detailed below and are further described later in this document as it pertains to the specific types of data elements.

Data Quality Component	Description	Features
Timeliness	The extent to which the data are collected and available when needed.	<ul style="list-style-type: none"> <li>• Data are entered soon after collected</li> <li>• Changing data are kept up to date</li> </ul>

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Data Quality Component	Description	Features
Completeness	The extent to which all required data are known and documented. Coverage and utilization are both forms of completeness.	<ul style="list-style-type: none"> <li>● All clients served are entered</li> <li>● Complete identifying data entered</li> <li>● Complete characteristics fields entered</li> <li>● All services entered</li> <li>● Complete exit data entered</li> </ul>
Accuracy	The extent to which the data reflects the real-world client or service.	<ul style="list-style-type: none"> <li>● Staff enter accurate data</li> <li>● Staff perform logic checks of the data to uncover where inaccuracies lie.</li> </ul>
Consistency	The extent to which the data are equivalent in the way it is collected and stored.	<ul style="list-style-type: none"> <li>● Common interpretation of questions</li> <li>● Common interpretation of client answers</li> <li>● Common knowledge of what fields to answer</li> </ul>

### 2.5.2 Lookup Response Option: Client Prefers Not To Answer

Most HUD data elements provide a "Client Prefers Not To Answer" response option. Please make your best attempt at asking all clients all of the Universal Data Elements and Program Specific Data Elements.

There might be some situations where asking certain questions may be unsafe for participants. For example, the PSDEs related to domestic violence are highly sensitive for DV survivors. Please use your discretion with the time, place and manner in which you ask these questions..

## 2.6 HMIS Program Specific Data Quality Standards

### 2.6.1 Purpose

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

### 2.6.2 Timeliness

**All required data are to be entered into HMIS within 10 calendar days of the associated activity (e.g. program entries, program exits, service transactions, etc. as indicated by data workflow).**

### 2.6.2.1 Definition

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

### 2.6.2.2 Importance

Entering data into HMIS in a timely manner is necessary to ensure that clients receive or make connections to the services they need in a quick and efficient manner. Timely data entry also ensures that data are accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Finally, when data are entered in a timely manner, it helps reduce human error that can occur when too much time has elapsed between the data collection/service transaction and the data entry.

### 2.6.2.3 Standards

HSD encourages all HMIS-participating organizations to aspire to 100% of data being entered into HMIS in a timely manner. Timely data entry allows the agencies to gain an accurate picture of the various programs clients are involved with. However, HSD recognizes this may not be realistic or even possible in all cases.

## 2.6.3 Completeness

*“Are all of the required data elements for clients served recorded in HMIS?”*

### 2.6.3.1 Definition

Data Completeness is the percentage of data fields for any given client, project enrollment, provider, organization, or system that are filled in or answered. Data Completeness is also the degree to which all required data are known and documented. Incomplete or missing data always consists of null and “data not collected” values, and may include “other” values for some data elements.

### 2.6.3.2 Importance

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

### 2.6.3.3 Standards

**The percentage of all clients served with “null/missing” UDEs should be no higher than 10% across all programs.** Data completeness is evaluated for the current fiscal year at the conclusion of each quarter to ensure organizations are completing records to the best of their ability, including updating records and entering in additional information that is gained as client interactions take place. HSD encourages all HMIS-participating organizations to aspire to 100% collection of all data elements (Universal, Multnomah, Project Descriptor, and Program Specific), but recognize that 100% data completeness may not be realistic or possible in all cases.

## 2.6.4 Accuracy/Validity

*“Are all clients in the correct project?” and “Are all clients in HMIS” and “Does HMIS data accurately reflect true client information?”*

### 2.6.4.1 Definition & Importance

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

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

### 2.6.4.2 Standards

A list of common accuracy measures are included below. These measures will be included in data quality monitoring and should be maintained to **90% or better error rate for a given project**.

Accuracy/Validity Measure	Data Element(s) Involved	Accuracy/Validity Test
Date of Birth <> Project Start Date	Date of Birth (DOB) Project Start Date (PSD)	DOB is not the same date as PSD for Heads of Households
Household Error	Relationship to Head of Household	At least one, and only one, Head of Household per entry (no HoH is an error, multiple HoH is an error)
Prior Living Situation and Dependencies are Congruent	Prior Living Situation (PLS) Length of time in previous place Approximate date homelessness started Number of times experiencing homelessness in last 3 years Number of months experiencing homelessness in last 3 years	Dependencies answered if PLS indicates the client came from a homeless situation.
Disabling Condition has a Source	Disabling Condition (DS) Physical Disability Developmental Disability Chronic Health Condition HIV/AIDS Mental Health Problem Substance Abuse	If Yes to Disabling Condition, then Yes to at least one source. Each category of disability must have a Yes or No answer.
Monthly Income has a Source	Income Sources	If Yes to Income, then Yes to at least one source. Each category of income must have a Yes or No answer.

*Table Cont'd on Next Page*

Accuracy/Validity Measure	Data Element(s) Involved	Accuracy/Validity Test
Non-Cash Benefits has a Source	Non-Cash Benefits (NCB) Sources	If Yes to NCB, then Yes to at least one source. Each category of NCB must have a Yes or No answer.
Health Insurance has a Type	Health Insurance (HI) Types	If Yes to HI, then Yes to at least one source. Each category of HI must have a Yes or No answer.
Domestic Violence and Dependencies are congruent	Domestic Violence When experience occurred Are you currently fleeing	Dependencies answered if DV indicates the client experienced DV.
Veterans are Not Minors	Veterans Status (VS) Date of Birth	VS is not Yes for clients under 18 years of age.
Client Location is Appropriate to Project	Client Location Project Information Continuum of Care Information	CL for a client enrollment matches CoC info for the project.
Housing Move-in Date is Accurate for Permanent Housing (PH) programs	Housing Move-in Date (HMID) Entry Date	Ensure HMID does not predate the Entry Date for RRH, PSH, PH-Housing Only, PH- Housing with Services.
A Null Exit Date Accurately Reflects Program Participation	Program Type Entry Date Exit Date	Clients enrolled in a Permanent Housing program type for 6 months or more without a HMID must be confirmed as still active in the program.

## 2.6.5 Consistency

*“Are the required data elements being recorded in HMIS in a consistent manner across projects?”*

### 2.6.5.1 Definition/Importance

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

### 2.6.5.2 Standards

**Initial User Training Standard:** All workers entering or accessing data within HMIS must complete an initial training before they will be allowed to access the live HMIS system. Additional training opportunities and ongoing support are offered to each user by HSD. Training is also offered for intake workers who do not do data entry, to ensure they understand the purpose and importance of the information they are collecting.

**Monthly Activity User Standard:** Users must log into HMIS and enter data at least once every **30 days** to maintain active user status. Users must enter data on a regular and consistent basis to maintain HMIS access to prevent a backlog of data entry and to ensure they maintain familiarity with HMIS and the workflows for which they are responsible.

**User Employment Standard:** HSD must be notified by an organization within 72 hours of any existing HMIS user no longer being employed at the organization or moving into a role for which they no longer require access to HMIS.

## 3 Data Quality Monitoring Plan

### 3.1 Purpose

The Data Team conducts regular HMIS data quality monitoring and communicates with agencies to ensure a high level of data quality at all times. Regular, timely monitoring ensures that data quality issues are more likely to be identified and resolved in a timely manner. This in turn ensures a higher degree of accuracy in reports and analysis projects.

### 3.2 General Process

HSD's standard DQ monitoring process evaluates DQ for the most recent 12-month period. The goal of the process is to ensure that service agencies are entering, reviewing and updating data to the best of their ability. HSD typically monitors at the project, organization, and system levels to ensure that the above standards are met by all HMIS-participating organizations.

HSD consistently identifies areas for improvement in the DQ monitoring process. Planned improvements in the near term include:

- DQ monitoring at the user level, as needed
- Development and implementation of tools that identify user training needs
- Agency and project level progress monitoring of DQ cleanup
- Improvement of the granularity of DQ benchmarks
- Monitoring of elements not included in the Eva output

A current copy of this HMIS Data Quality Plan will be posted to the HSD website to ensure that HMIS-participating organizations are aware of the minimum data entry standards they are required to meet.

HSD will monitor data quality. HMIS-participating organizations will receive reports from HSD regarding their HMIS data quality, as well as specific information regarding the nature of any inaccuracies and the methods by which to correct them. HSD and the organization and/or end user will work together to develop a plan and timeline to improve to meet Data Quality standards.

### 3.3 Monitoring Schedule

HSD runs Data Quality Reports for 12 months of data entry on a monthly basis. HSD sends these reports on the second Wednesday of every month to each HMIS-participating organization.

Data quality reports are produced using Eva, a web-based HUD tool that evaluates and identifies participant-level data issues in HMIS.

Each report is an aggregated, agency-level Excel file that contains at least five tabs. The first tab is an Organization Summary detailing the count of errors by priority type. These priority types were developed by HUD. The following three tabs each contain the Client ID (or “Personal ID”), the Project Name, and the Issue. Users can reference the Guidance tab to fix issues in HMIS. HSD developed the current monitoring process to be scalable so that all agencies have the information needed to correct many data errors commonly found in HMIS projects.

For persistent data quality issues, projects may be contacted by HSD to discuss the implementation of a Data Quality Improvement Plan (DQIP).

### 3.4 User License Monitoring

HSD runs regular reports on HMIS User activity to monitor existing users quarterly and as needed to show when users last logged into the system.

Agencies should notify HSD when existing HMIS users are terminated or shift to roles that no longer require access to HMIS. Please notify [hmishelp@multco.us](mailto:hmishelp@multco.us) of any such changes **within five business days**.

HSD will provide organizations with a list of all users who have access to HMIS on a quarterly basis. The organization’s data contact will notify HSD if any user on this list no longer requires access to HMIS.

### 3.5 Monitoring of Data Entry Initiation for New Projects

HSD monitors newly set up projects every two weeks, beginning 30 days after project setup. The purpose of this monitoring is to ensure that:

- data entry begins as expected and
- DQ standards are being met

As part of this monitoring, HSD runs a CoC Annual Performance Report (CoC APR) every two weeks following project setup to identify when data entry begins.

Once the CoC APR returns results, HSD staff run a DQ report called “Data Quality (Local 0260)” to assess data quality. Staff also check a random sample of ROIs to ensure accurate entry.

HSD staff give written feedback and provide TA or training as needed to providers who appear to be struggling in any areas.

## Revision History

April '25: Updated tables identifying and describing UDE, PSDE & MDE. JOHS was renamed to HSD. Various rewrites for plain language and clarity. Added significant detail to the Monitoring Plan.