



Homeless Services Department

HMIS Data Quality & Monitoring Plan

Updated July 2026

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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 Multnomah’s 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 active partnership with 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.
- A current copy of this HMIS Data Quality Plan is [posted to the HSD website](#) to ensure that HMIS-participating organizations are aware of the minimum data entry standards they are required to meet.

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 experiencing homelessness or at-risk of homelessness.

The U.S. Department of Housing and Urban Development (HUD) through the Office of Special Needs Assistance Programs (SNAPS) partners with other federal agencies to establish the requirements for HMIS to ensure that there is a comprehensive data response to the congressional mandate to report annually on national homelessness. It is used by all programs 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 (VA) and their respective programs to measure program performance and participate in benchmarking of the national effort to end homelessness. ([HMIS Data Standards](#))

In addition to these HUD standards, the local CoC also has standards tied to contractual outcomes and outputs. We have the right to share data outside the system in accordance with the policies within the Privacy & Security Notice, accessible through the Multnomah County Homeless Services Department's "[HMIS Links for Providers](#)" webpage.

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 program- and system-levels;
 - Enables a CoC, and programs 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 program 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 homeless services programs that are federally funded are required to use HMIS and must meet certain data quality expectations to ensure accurate reporting for those grants.

Other government agencies have HMIS data entry requirements as well. These include but are not limited to Oregon Housing and Community Services (OHCS), the Oregon Department of Human Services (ODHS), and Multnomah County's Homeless Services Department (HSD). All providers that enter data into the HMIS contribute to the overall picture of homelessness in the local area.

All homeless services programs entering data into HMIS, regardless of funding source, are required to provide data consistent with the standards outlined in this document.

2.4 HMIS Data

2.4.1 Universal Data Elements (UDEs)

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

- Local Reports
 - Quarterly Contract Monitoring dashboard updates
 - Supportive Housing Services (SHS) Quarterly Report
 - Ad hoc reports and analyses
- HUD Reports
 - [Point in Time Count \(PIT\)](#)
 - [Housing Inventory County \(HIC\)](#)
 - [Annual Performance Report \(APR\)](#)
 - [Longitudinal System Analysis \(LSA\)](#)
 - [System Performance Measures \(SPM\)](#)

2.4.1.1 UDE Collection

- Many UDEs must be collected for all clients served by a HMIS-participating program. Some UDEs are only required for certain household members. Please see the UDE table below, which includes the household (HH) members and collection points for which UDEs are required. For detailed information about which Project Types need to collect each UDE, reference the [Data Collection Matrix](#) maintained by HSD staff.
- 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	Collection Point - <i>Required for</i>
First Name	Record Creation - <i>All HH members</i>
Last Name	Record Creation - <i>All HH members</i>
Name Data Quality - Omit from intake forms.	Record Creation - <i>All HH members</i>
SSN Data Quality - Omit from intake forms. Select “Data not collected (HUD)” in HMIS	Record Creation - <i>All HH members</i>

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UDE Field (Cont'd)	Collection Point - <i>Required for</i>
US Military Veteran? <i>(lookup question)</i> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client prefers not to answer 	Record Creation - <i>All Adults</i>
Date of Birth	Entry Assessment - <i>All HH members</i>
DoB Data Quality - Omit from intake forms.	Entry Assessment - <i>All HH members</i>
Relationship to Head of Household <i>(lookup question)</i> <ul style="list-style-type: none"> ● Self (head of household) ● Head of household's child ● Head of household's spouse or partner ● Head of household's other relation member (other relation to head of household) ● Other: non-relation member 	Entry Assessment - <i>All HH members</i>
Race & Ethnicity <i>(lookup question)</i> ~ <i>Select all the apply</i> ~ <ul style="list-style-type: none"> ● American Indian, Alaska Native, or Indigenous ● Asian or Asian American ● Black, African American, or African ● Hispanic/Latina/o ● Middle Eastern or North African ● Native Hawaiian or Pacific Islander ● White ● Client doesn't know ● Client prefers not to answer ● Additional Race and Ethnicity Detail <i>(write in)</i> 	Entry Assessment - <i>All HH members</i>
Does the client have a disabling condition? <i>(lookup question)</i> <ul style="list-style-type: none"> ● No ● Yes ● Client doesn't know ● Client prefers not to answer 	Entry Assessment - <i>All HH members</i>
Enrollment CoC Omit from intake forms. Select "OR-501..." in HMIS	Entry Assessment - <i>All HH members</i>
Prior Living Situation <i>(lookup question)</i> See Appendix A of the FY2026 HUD Data Standards for the lookup options and their descriptions.	Entry Assessment - <i>All Adults</i>

UDE Field (Cont'd)	Collection Point - Required for
Length of Stay in Previous Place <i>(lookup question)</i> <ul style="list-style-type: none"> ● One night or less ● Two to six nights ● One week or more, but less than one month ● One month or more, but less than 90 days ● 90 days or more, but less than one year ● One year or longer ● Client doesn't know ● Client prefers not to answer 	Entry Assessment - All Adults
On the night before did you stay on the streets, emergency shelter or safe haven? <i>(lookup question)</i> <ul style="list-style-type: none"> ● No ● Yes 	Entry Assessment - All Adults
Approximate date this episode of homelessness started	Entry Assessment - All Adults
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 <i>(lookup question)</i> <ul style="list-style-type: none"> ● One time ● Two Times ● Three times ● Four or more times ● Client doesn't know ● Client prefers not to answer 	Entry Assessment - All Adults
Total number of months homeless on the street, in shelter or safe haven in the past three years <i>(lookup question)</i> <ul style="list-style-type: none"> ● One month (this time is the first month) ● Months ranging from 2-12 (choose the appropriate number of months) ● More than 12 months ● Client doesn't know ● Client prefers not to answer 	Entry Assessment - All Adults
Project Start Date	Project Start - All HH members
Project Exit Date	Project Exit - All HH members
Destination <i>(lookup question)</i> <i>See Additional Notes on UDEs below for lookup options.</i>	Project Exit - All HH members

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2.4.1.2 Additional Notes on UDEs

- Race & Ethnicity and Gender both allow for multiple selections.
- 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.
- 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](#) for more information on which questions are required in which situations. As of this writing, this information can be found in Appendix A: Living Situation Response Categories & Descriptions.

- The list of HUD-defined Destination values can be found on the [HUD Exchange website](#).

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 program type or funding source. Confirmation of data completeness requirements can be found in the [Data Collection Requirements \(DCR\) Matrix](#). For federally funded programs, see the latest [HMIS Data Standards](#) for more information on which PSDEs are required.

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 PSDE Collection

PSDEs may have different Collection Points:

- Project start
- Interim update
- Annual assessment (for all PSH programs)
- Project exit
- The occurrence of a given event

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PSDE Field	Collection Point - Required for
Housing Move-in Date (HMID)	Entry Assessment, Interim Update - <i>All HH members</i>
Sexual Orientation <i>(lookup question)</i> <ul style="list-style-type: none"> ● Heterosexual ● Gay ● Lesbian ● Bisexual ● Questioning/Unsure ● Other <i>(write in)</i> ● Client doesn't know ● Client prefers not to answer ● Data not collected 	Entry Assessment, Interim Update, Annual Assessment - <i>All Adults</i>
Non-Cash Benefits from any source <i>(lookup question)</i> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client prefers not to answer 	Entry Assessment, Interim Update, Annual Assessment, Project Exit - <i>All Adults & HoH</i>
Source of Non-Cash Benefit <i>(lookup question) ~ Select all that apply ~</i> <ul style="list-style-type: none"> ● Supplemental Nutrition Assistance Program (Food Stamps) ● TANF Child Care Services ● TANF Transportation Services ● Other TANF Funded Services ● Other Source If Other, Please Specify <i>(write in)</i> Amount of Non-Cash Benefit <i>(write in)</i>	Entry Assessment, Interim Update, Annual Assessment, Project Exit - <i>All Adults & HoH</i>
Income from Any source <i>(lookup question)</i> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client prefers not to answer 	Entry Assessment, Interim Update, Annual Assessment, Project Exit - <i>All Adults & HoH</i>

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PSDE Field (Cont'd)	Collection Point - <i>Required for</i>
<p>Source of Income <i>(lookup question) ~ Select all that apply ~</i></p> <ul style="list-style-type: none"> ● Alimony or Other Spousal Support ● Child Support ● Earned Income ● General Assistance ● Other ● Pension or retired income from another job ● Private Disability Insurance ● Retirement Income from Social Security ● Self Employment Wages ● SSDI ● SSI ● TANF ● Unemployed Insurance ● VA Non-Service Connected Disability Pension ● VA Service Connected Disability Compensation ● Workers Compensation <p>If Other, Please Specify <i>(write in)</i></p> <p>Monthly Amount <i>(write in)</i></p>	<p>Entry Assessment, Interim Update, Annual Assessment, Project Exit - <i>All Adults & HoH</i></p>
<p>Health Insurance Type <i>(lookup question)</i> <i>~ Select all the apply ~</i></p> <ul style="list-style-type: none"> ● MEDICAID ● MEDICARE ● State Children’s Health Insurance Program ● Veteran’s Health Administration (VHA) ● Employer- Provided Health Insurance ● Health Insurance obtained through COBRA ● Private Pay Health Insurance ● State Health Insurance for Adults ● Indian Health Services Program ● Other 	<p>Entry Assessment, Interim Update, Annual Assessment, Project Exit - <i>All HH members</i></p>
<p>Disability Type <i>(lookup question)</i> <i>~ Select all the apply ~</i></p> <ul style="list-style-type: none"> ● Alcohol Use Disorder ● Drug Use Disorder ● Both Alcohol and Drug Use Disorder ● Developmental Disability ● HIV/AIDS ● Mental Health Disorder ● Physical Disability ● Chronic Health Condition 	<p>Entry Assessment, Interim Update, Project Exit - <i>All HH members</i></p>

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PSDE Field (Cont'd)	Collection Point - Required for
<p>Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently (<i>lookup question</i>)</p> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client Prefers not to answer 	<p>Entry Assessment, Interim Update, Project Exit - <i>All HH members</i></p>
<p>Disability determination Omit from intake forms. See "Additional Notes on PSDEs" section below.</p> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client Prefers not to answer 	<p>Entry Assessment, Interim Update, Project Exit - <i>All HH members</i></p>
<p>Survivor of Domestic Violence (<i>lookup question</i>)</p> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client Prefers not to answer 	<p>Project Start, Interim Update - <i>All Adults & HoH</i></p>
<p>If Yes for survivor of Domestic Violence, when experience occurred (<i>lookup question</i>)</p> <ul style="list-style-type: none"> ● Within the past three months ● Three to six months ago ● From six to twelve months ● More than a year ago ● Client doesn't know ● Client prefers not to answer 	<p>Project Start, Interim Update - <i>All Adults & HoH</i></p>
<p>If Yes for survivor of Domestic Violence, Are you currently fleeing? (<i>lookup question</i>)</p> <ul style="list-style-type: none"> ● Yes ● No ● Client doesn't know ● Client Prefers not to answer 	<p>Project Start, Interim Update - <i>All Adults & HoH</i></p>
<p>Current Living Situation</p>	<p>Occurrence point (at time of contact) - <i>All Adults</i></p>
<p>Date of Engagement</p>	<p>Occurrence point (at point of engagement) - <i>All Adults</i></p>

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PSDE Field (Cont'd)	Collection Point - <i>Required for</i>
Coordinated Entry Assessment	Entry Assessment - <i>HoH only</i>
Coordinated Entry Event	Interim Update - <i>HoH only</i>
Sex <ul style="list-style-type: none"> ● Male ● Female ● Client doesn't know ● Client Prefers not to answer 	Record Creation - <i>All HH members</i>

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 Coordinated Entry & Street Outreach programs. Current Living Situation involves multiple questions. Ensure all questions are present on intake forms.
- **Date of Engagement:** Only required for Street Outreach and Night-by-Night shelter 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):** Required for all permanent housing programs (RRH, PH w/ and w/o Services, and PSH), as well as for “Pay for Success” programs (marked Other as project type) and for “VA GPD Case Management/Housing Retention” programs (Services Only project type). Only enter a HMID if the participant is being housed *by this program*. Exits to permanent housing destinations beyond what your program provides can be captured in the *Exit Destination* field.
 - Each permanent housing entry should have either zero or one HMID. Multiple HMIDs should never be added to a single entry.
 - HMIDs must be on or after the Entry Date for a given entry.
 - HMIDs that occur on the date of program entry should be transacted in HMIS “at entry”. HMIDs that occur after the Entry Date should be transacted via an interim review. In Clarity HMIS, the HMIS system we’re migrating to in 2027, interim reviews are called “Project Status”.
 - See the Timeliness section below for additional information on managing HMIDs when people return to homelessness.
- Certain homelessness prevention programs 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.
- **Sexual Orientation:** Only required for *all* permanent supportive housing (PSH) programs.

- The three questions around **Domestic Violence** are required for all project types *except* Street Outreach. Certain homelessness prevention programs may also be exempt.
- **Sex:** Sex is required by HUD for federally funded programs. While this field is a HUD-required PSDE for all program types except “Other”, we have made the decision locally to not require this field be completed. HMIS participating agencies may still collect this information if they so choose.
- 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	Collection Point - <i>Required for</i>
<p>Gender (<i>lookup question</i>) ~ <i>Select all the apply</i> ~</p> <ul style="list-style-type: none"> • Woman (Girl, if child) • Man (Boy, if child) • Culturally Specific Identity (e.g., Two-Spirit) • Transgender • Non-Binary • Questioning • Different Identity • Client doesn't know • Client prefers not to answer • If Different Identity, please specify (<i>write in</i>) 	<p>Entry Assessment - <i>All HH members</i></p>
<p>Priority Population</p>	<p>Entry Assessment - <i>HoH only</i></p>

2.4.3.2 Additional Notes on MSDEs

- The Priority Population question is required for SHS-funded programs and all other HSD-funded programs. 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, also known as the “Pop A” form. This form should be included in program intake packets. Contact your MultCo HSD Program Specialist or Contract Manager with questions.

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2.4.4 Project Descriptor Data Elements (PDDE)

2.4.4.1 Purpose

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

- Associate client-level records with the program enrollments
- Identify which federal/local partner programs are providing funding to the program
- Record bed and unit inventory and other information, by program. Bed & Unit inventories are important for 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 (Program) 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 programs)
- 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 mostly 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.
- PDDEs are created at initial program setup within HMIS, and program 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.
- Participating agencies may use [this form](#) to inform HSD staff of any PDDEs that require updating.
- 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"> ● Data are entered soon after collected ● Changing data are kept up to date
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"> ● All clients served are entered ● Complete identifying data entered ● Complete characteristics fields entered ● All services entered ● Complete exit data entered
Accuracy	The extent to which the data reflects the real-world client or service.	<ul style="list-style-type: none"> ● Staff enter accurate data ● Staff perform logic checks of the data to uncover where inaccuracies lie.
Consistency	The extent to which the data are equivalent in the way it is collected and stored.	<ul style="list-style-type: none"> ● Common interpretation of questions ● Common interpretation of client answers ● Common knowledge of what fields to answer

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, program 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 within the number of days specified above. Timely data entry allows the agencies to gain an accurate picture of the various programs clients are involved with. HSD recognizes this may be difficult. HSD may provide technical assistance to agencies who consistently do not meet the timeliness standard.

Exit Dates must be added to all entries after a participant leaves a program. This includes when participants return to homelessness. If the actual Exit Date is unknown, staff should use a best-guess approximation, entering Exit Dates as soon as possible.

When participants return to homelessness, agency staff should exit them from residential programs (i.e. permanent or transitional housing or emergency shelter) *the day after* the last night they actually occupied the bed. For example, if someone's last overnight stay is the night of 06/30/26, they should be exited on 07/01/26.

Emergency shelters may hold beds for a number of nights if someone disappears. This ensures the person's bed is still available if they return. If they don't return and the hold on the bed is released, the participant should be exited the day after the last night they actually occupied the bed. For example, let's say a shelter has a five-day bed hold policy. If Fred disappears from that shelter on 06/30/26, his bed is held until the night of 07/04/26. If Fred doesn't occupy the bed on 07/04/26, the hold on the bed is released. Fred should be exited from the shelter on 07/01/26, since the last night he stayed in the shelter was 06/30/26.

We recognize that this may impact a shelter’s utilization percentage. That is OK. Contractual utilization expectations account for this possibility. Exiting participants on the day after their last night in a bed also helps avoid overlapping entries.

For permanent housing programs with tenant-based vouchers: If a previously housed participant returns to homelessness, they should be exited from their HMIS enrollment, even if they still hold the voucher. In these cases, staff should create a new entry *without* a Housing Move-In Date (HMID), beginning the day after their last night in the previous entry. If the participant later regains housing, a new HMID should be added to the new entry via an interim update. Multiple HMIDs should never be added to a single entry.

2.6.2.4 Methodology

While HSD staff do not yet have the capacity to monitor timeliness at a system level, agencies are able to run HMIS reports to gauge the timeliness of activities they’ve entered into the system. Reach out to hmishelp@multco.us to learn more.

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 that are filled in or answered for required clients, program enrollments, programs, organizations, or systems. 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. Data completeness requirements for a program depend on its Project Type, System of Care and Funding Source. More detail on data completeness requirements can be found in the [Data Collection Requirements \(DCR\) Matrix](#), but it is always best practice to check with your funder as well.

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.

2.6.3.4 Methodology

See the *Data Quality Monitoring Plan* section below for more information.

2.6.4 Accuracy/Validity

“Are all clients in the correct program?” 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 program 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.

HMIS participating agencies receive a Data Quality Report from HSD staff on a monthly basis that contains record-level detail on errors within their providers. The “Issue Guidance” tab reflects all of the data quality issues this report flags, and how to fix them. The Data Quality Report gets sent to participating agencies’ staff members of their choice, usually including the HSD “data contact”. It is the HMIS participating agency’s responsibility to address the data quality issues shared in this report on an ongoing and timely basis.

HSD staff monitor system-wide progress on these reports by comparing month-by-month totals of each issue identified in the Data Quality Reports over time. HSD staff may reach out to a participating agency if through the progress monitoring it’s discovered that a high volume of issues are being created, or a low percentage of identified issues are being resolved.

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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 program**.

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.
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.

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Accuracy/Validity Measure	Data Element(s) Involved	Accuracy/Validity Test
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 programs?”

2.6.5.1 Definition/Importance

Data consistency means that data are understood, collected, and entered in the same way across all programs 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 5 business days 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. Notification can be done by emailing hmishelp@multco.us.

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3 Data Quality Monitoring Plan

3.1 Purpose

HSD's data team conducts regular HMIS data quality monitoring and communicates with agencies to encourage best practices for data quality at all times. Regular, timely monitoring ensures that data quality issues are more likely to be identified and resolved in a timely fashion. Higher data quality ensures a higher degree of accuracy in reports and analysis projects.

3.2 General Process

On a monthly basis, HSD data team staff produce and distribute two sets of agency-specific data quality reports. One set of reports contains issues specifically related to Coordinated Entry. The other contains DQ issues for the balance of a given agency's HMIS programs. We refer to the non-Coordinated Entry reports as "systemwide" reports.

Data team staff produce systemwide DQ reports using a combination of input files. One of these inputs for the systemwide reports is a tool called "Eva", a web-based, HUD-approved platform that identifies participant-level data issues in HMIS. Other inputs are custom reports from HMIS. The purpose of the custom inputs is to supplement - and in some cases substitute - the issues from the Eva report. All inputs are processed and the outputs produced using an HSD-developed script in a coding software called "R".

Each systemwide report is an agency-specific Excel file containing multiple tabs. At time of writing, the report contains five tabs with DQ issues. Following the Eva format, four of these tabs are called *High Priority, Errors, Warnings, and Overlapping Entries*. The last tab contains missing ROI issues. Other tabs may be added over time. Each tab contains the information necessary for users to identify and resolve each issue. The report also includes an *Instructions* tab and an *Issue Guidance* tab. The *Instructions* tab provides a prioritization order for the DQ tabs, as well as information about contacting HSD's email helpdesk for assistance. The *Issue Guidance* tab provides information on how to resolve each issue in the report.

At time of writing, the Coordinated Entry (CE) DQ report contains five tabs including *Date of Assessment, ROI, HoH, Completeness, and Multiple Entry*. *Date of Assessment* focuses on the Coordinated Entry element. *ROI* identifies missing ROIs for the main CE program. *HoH* identifies missing Relationship to Head of Household answers. *Completeness* addresses missing data issues. *Multiple Entry* flags records with multiple, open CE entries. Each tab contains the information necessary to resolve the issue, including a *Correction* column that describes the issue and how to fix it.

The goal of both DQ reports is to ensure that HMIS agencies are entering, reviewing and cleansing data to the best of their ability. It is each agency's responsibility to resolve the data quality issues in their reports on an ongoing and timely basis.

HSD monitors data quality at the program, organization, and system levels to ensure that the standards identified above are met by all HMIS-participating organizations. HSD's monitoring process utilizes a custom R script and a Tableau dashboard to track 1) percentages of issues that are resolved from the previous month and 2) the number of new issues produced on a monthly basis. HSD staff may engage participating agencies with consistently high volumes of issues being produced, or low percentages of issues being resolved. HSD

may schedule training sessions to address opportunity areas. Agencies with persistently high numbers of data quality issues may receive a Data Quality Improvement Plan (DQIP).

3.3 Monitoring Schedule

HSD distributes DQ issues for the most recent 12 months' worth of data on a monthly basis. HSD staff address any issues older than 12 months on an ongoing basis. Systemwide reports are distributed on the second Wednesday of every month. Coordinated Entry-related reports are sent on the fourth Wednesday of every month.

3.4 User License Monitoring

HSD runs a monitoring process to identify users that have not logged into HMIS in 30 days or more. We refer to these users as "inactive." Unfortunately, the current HMIS system does not automatically deactivate inactive users, so HSD staff must conduct manual monitoring. Due to the arduousness of the process, HSD conducts this monitoring every 90 days.

Inactive users are contacted via email to assess whether their HMIS licenses are still needed. HSD staff revoke licenses for users who do not respond to repeated contact attempts, are confirmed to have left their position that required HMIS access, or have deactivated email addresses.

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 of any such changes ***within five business days***.

3.5 Monitoring of Data Entry Initiation for New Programs

HSD monitors newly set up programs every two weeks, beginning 30 days after program 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 program setup to confirm data entry startup. Once data entry begins, HSD staff run DQ reports from HMIS called "Data Quality (Local 0260)" to assess data quality. Staff also check a random sample of ROIs to ensure accurate entry.

HSD HMIS admin staff give written feedback and provide TA or training as needed to providers who appear to be struggling in any areas. If the provider continues to struggle with their data quality following TA, data staff reach out to the agency's contract manager to assist.

Revision History

- June '26: Added Sex element to PSDE table, moved Gender to MSDE table. Updated references to 2026 HUD HMIS Data Standards. Updated descriptions of data quality monitoring practices. Addressed discrepancies in guidance re: user management. Added detail to section for 2.6.2.4 Methodology. Added guidance related to exits to homelessness and subsequent re-entry into programming. Made various updates to language for clarity & accuracy.
- November '25: Added new HMID requirement for Pay for Success and select GPD programs in section "2.4.2.2 Additional Notes on PSDEs"
- July '25: Added Sexual Orientation element to PSDE table and related notes in section 2.4.2.2 "Additional Notes on PSDEs". Clarified language related to the Multnomah-Specific Data Element called "Priority Population". Added placeholder section for 2.6.2.4 Methodology.
- 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.