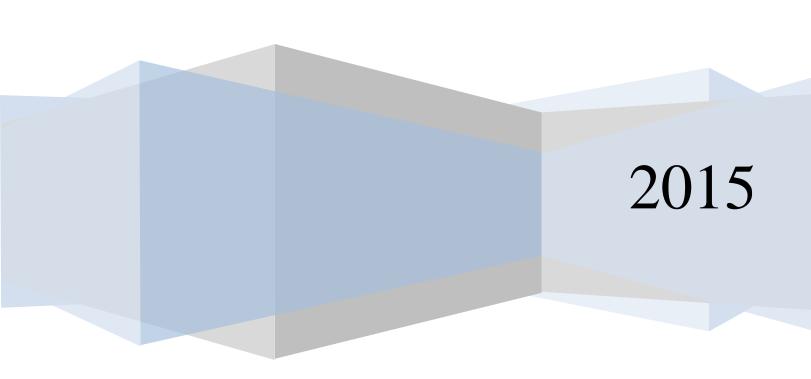


Pennsylvania
Homeless
Management
Information System
(PA HMIS)

Appendix B: DATA QUALITY AND FUNCTIONALITY PLAN



Adopted on: Western CoC PA-601 November 12, 2015

Version: [1.0]



# **Table of Contents**

DEFINITION OF DATA QUALITY	3
IMPORTANCE OF DATA QUALITY FOR HMIS GOALS	3
ARTICLE 1: PURPOSE OF PLAN	3
TIMELINESS OF DATA COLLECTION	4
DATA COMPLETENESS	4
DATA ACCURACY (DATA VALIDITY)	4
LENGTH OF TIME INDIVIDUALS AND FAMILIES REMAIN HOMELESS	5
MEASURING RECIDIVISM THROUGHOUT THE CONTINUUM OF CARE	6
EFFECTIVENESS OF THE HOMELESS SERVICE SYSTEM	6
ARTICLE 2: PA HMIS LEAD AGENCY RESPONSIBILITIES	8
ARTICLE 3: CONTINUUM OF CARE RESPONSIBILITIES	9
ARTICLE 4: DATA COLLECTION REQUIREMENTS BY PROGRAM TYPE	10
Emergency Shelters (ES):	
Transitional Housing (TH), Permanent Supportive Housing (PSH), Permanent Hous Safe Haven (SH):	_
Projects for Assistance in Transition from Homelessness (PATH)	11
Runaway and Homeless Youth Program (RHY)	12
Veteran's Affairs Programs (VA):	
Other [Non-State or Non-Federally Funded Programs]:	15
ARTICLE 5: Continuum Performance Measures	16
ARTICLE 6: PA HMIS SYSTEM PERFORMANCE MEASURES	17
ARTICLE 7: MONITORING	18
ARTICLE 8: COMPLIANCE PLAN	18



## **DEFINITION OF DATA QUALITY**

HMIS data quality refers to the extent that data recorded in a HMIS accurately reflects the same information in the real world. However, to meet the HMIS goal of presenting accurate and consistent information on homelessness, it is critical that an HMIS have the best possible representation of reality as it relates to homeless people and the programs that serve them. Specifically, it should be our goal to record the most accurate, consistent and timely information in order to draw reasonable conclusions about the extent of homelessness and the impact of homeless services.

Enhancing HMIS Data Quality July 2005 U.S. Department of Housing and Urban Development Office of Community Planning and Development

# IMPORTANCE OF DATA QUALITY FOR HMIS GOALS

"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.": 2001 Congressional directive

These goals are not only important on the federal level but also critical for understanding homelessness and program planning at the State and local levels of government.

#### ARTICLE 1: PURPOSE OF PLAN

The purpose of data quality is to record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services and about persons who receive assistance that are at-risk of becoming homeless over time. This data quality and functionality plan is essential to produce an accurate unduplicated count of persons who are homeless and at-risk for the Balance of State Continuums of Care; to understand the extent and nature of homelessness locally, regionally and nationally; and to understand patterns of service use and measure the effectiveness of programs. The following six areas are the key benchmarks to the success of reporting accurate meaningful data collected through PA HMIS.



#### 1. TIMELINESS OF DATA COLLECTION

For the most useful method of reporting, the PA HMIS needs to include the most current information on the clients served by participating homeless programs. This is to ensure real-time data quality. The following points outline the requirements of data timeliness of PA HMIS.

- All participating programs are required to update PA HMIS within 5 business days of client enrollment and client exit.
- Programs designated with a project type of either Transitional Housing (TH), Rapid Re-housing (RRH), or Permanent Housing (PH) who have participants in the program that are enrolled more than one year from their enrollment date must complete an annual assessment within a 60 day window. (This 60 day window must be completed between 30 days prior or after the participant's anniversary of enrollment date.)
- Housing programs should have an updated housing inventory recorded in PA HMIS to help understand the utilization of the program to determine funding request.

#### 2. DATA COMPLETENESS

PA HMIS data collection needs to be as complete as possible, (i.e., should contain all required information on all persons served in a certain type of program during the specified time period). The goal for data completeness through the PA HMIS Collaborative is to achieve the HUD defined requirement of HMIS bed coverage and HMIS participation by all local programs serving individuals and families experiencing or are at-risk of homelessness. This is essential for ensuring that the records are represented through the Annual Homeless Assessment Report (AHAR), which helps determine the congressional appropriation for funding programs who serve clients experiencing homelessness.

- All clients entered should have 100% of HUD's Universal Data Elements;
- At a minimum, 90% of data elements per client enrolled in a program should have program-specific data elements completed;
- If clients are over the age of 17, 100% of required data fields must be completed.
- If Services are required, 100% should have these services entered at time of service for the client.
- When a client exits a program 90% of clients must have data entered with required data elements for program exit.



# 3. DATA ACCURACY (DATA VALIDITY)

Information entered into PA HMIS must be valid, (i.e., the data should accurately represent information on the people that enter any of the program delivering services per the clients consent through a signed Release of Information(ROI) to be enter under the clients profile in PA HMIS.

Inaccurate data may be intentional or unintentional. In general, false or inaccurate information is worse than incomplete information, when compiling data, it is at least possible to acknowledge the gap. If a staff member is unaware or unsure of the response category because the information is missing in the intake, at the time of the enrollment data not collected should be selected, rather than to enter inaccurate information.

If a client has chosen to refuse a specific data element then the response must be recorded as "Client refused" rather than to enter inaccurate information. Now if the client is confused by the data element and does not know or none of the data responses for that category apply to them then the response selection must be "Client doesn't know" rather than to enter inaccurate information.

- At a minimum, 90% of data elements per client enrolled in a program should have program-specific data elements completed (specifically related to Emergency Shelter (ES) and/ or Coordinated Entry (CE) project);
- For each data element collected, only up to 5% of client responses of either "client doesn't know" or "Client refused" are accepted for reporting. Any data collection element over 5% must be reviewed for accuracy in data collection process and may not be included in reporting.

#### 4. LENGTH OF TIME INDIVIDUALS AND FAMILIES REMAIN HOMELESS

In several instances, people who are homeless often use more than one programs that are available to help them access housing, resolve a crisis, support their specific need, and link them with other services. Accurate program enrollment and exit dates and information on residence prior to program enrollment are critical in determining service use patterns that assess average and median length of stay and movement among different homeless programs throughout the Continuum of Care (CoC). The collection of accurate identifying information at each program is also necessary in order to identify the extent to which clients appear in multiple programs, how clients move through the system, and to detect recidivism of homelessness.



#### 4. Relevant Data Standards Fields

Field Name	Relevant Data
Project Type	1, 2, 3, 8, 9, 10, 13
Method for Tracking Emergency Shelter Utilization	
Project Entry Date	mm/dd/yyyy
Project Exit Date	mm/dd/yyyy
Length of Time on Street, in an Emergency Shelter, or Safe Haven – The approximate date on which the client began staying on the streets, in a ES or SH.	mm/dd/yyyy
This Data Standards element will be updated during 2015 from the Standards published in 2014.	
Residential Move-In Date	mm/dd/yyyy

#### 5. MEASURING RECIDIVISM THROUGHOUT THE CONTINUUM OF CARE

To the extent to which individuals and families that leave homelessness experience additional spells of homelessness. It is important that communities demonstrate a reduction in the percent of persons who have left homelessness (i.e., exited continuum projects into permanent housing destinations) who return to homelessness (i.e., return to continuum projects for which homelessness is an eligibility criterion). This benchmark allows the CoC to understand how many people actual return to homelessness and can then review specific cases to understand the barriers that were encountered during specific cases to better understand the gaps in services delivered in the Continuum for those experiencing homelessness.

#### 5. Relevant Data Standards Fields

5. Relevante Bata Standards Freids		
Field Name	Relevant Data	
Project Type	1, 2, 3, 4, 8, 9, 10, 13	
Project Entry Date	mm/dd/yyyy	
Project Exit Date	mm/dd/yyyy	
Destination	Selected destinations as described in Appendix A of the CoC Performance Measures Programming Specifications	
	(3, 10, 11, 19, 20, 21, 22, 23, 26, 28)	

#### 6. EFFECTIVENESS OF THE HOMELESS SERVICE SYSTEM

Assessing the effectiveness of the current homeless service system is critical to finding successful solutions to ending homelessness. For that reason, information



at program exit, such as destination and income, are important to learn if and how the system has helped to resolve clients' housing crisis and to improve their overall stability. Data on returning clients also contributes to this goal. Comparing program enrollment data with program exit data at the aggregate level will also provide a picture of the CoCs decision when determining the strategic planning of the community's coordinated entry system, the geographic coverage of continuum projects and the community's street outreach efforts. The following three measures are related to measuring the effectiveness of the Continuum.

## a) Number of Homeless Persons

#### 6a. Relevant Data Standards Fields

Field Name	Relevant Data
Project Type	1, 2, 8
Project Entry Date	mm/dd/yyyy
Project Exit Date	mm/dd/yyyy

# b) Employment and Income Growth for Homeless Persons in CoC Programfunded Projects

#### 6b. Relevant Data Standards Fields

Field Name	Relevant Data
Project Type	2, 3, 8, 9, 10, 13
Federal Partner Funding	Federal Partner Programs and Components, Grant
Sources	Start Date, Grant End Date
Date of Birth	mm/dd/yyyy
Project Entry Date	mm/dd/yyyy
Project Exit Date	mm/dd/yyyy
Income and Sources	Earned Income and all other sources

### c) Number of Persons who Become Homeless for the First Time

#### **6c. Relevant Data Standards Fields**

Field Name	Relevant Data
Project Type	1, 2, 3, 8, 9, 10, 13
Project Entry Date	mm/dd/yyyy
Project Exit Date	mm/dd/yyyy

# d) Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

#### **6d. Relevant Data Standards Fields**

Field Name	Relevant Data
Project Type	1, 2, 3, 4, 8, 9, 10, 13
Project Entry Date	mm/dd/yyyy



Project Exit Date	mm/dd/yyyy
Destination	Selected destinations as described in Appendix A of the
	CoC Performance Measures Programming Specifications

### **ARTICLE 2: PA HMIS LEAD AGENCY RESPONSIBILITIES**

The PA HMIS Lead Agency will continue regular user update trainings and webinars to ensure data collection procedures are understood correctly throughout the Continuums of Care. These trainings and webinars fulfill many needs. They keep PA HMIS users/overseers abreast of PA HMIS efforts across the Continuum. This helps maintain momentum, identify user concerns and software needs, share solutions to common problems and best practices, and provides opportunities to review and refine data quality processes.

From these trainings interested certified PA HMIS users will make up the PA HMIS Governing Board facilitated by the PA HMIS Lead Agency Administrator through each CoC's data sub-committee that is charged with making sure data quality remains prominent throughout the Continuums decision-making process. Each of the following actions will be implemented and overseen by this subcommittee with frequent reporting to the wider CoC committees.

# 1. Define parameters for data definitions.

The PA HMIS Governing Board is uniquely positioned to ensure common parameters (or meaning) to questions in the PA HMIS implementation. (i.e.; is asthma a physical disability? Is PTSD a mental illness or a separate category?) If there is confusion around questions that the PA HMIS System Administrator/ Agency Manager(s) or data standards manual cannot answer easily for a specific Continuum trend, the CoC Data subcommittee can discuss and agree upon a convention to bring to the PA HMIS Governing Board. This information then needs to be shared with all Continuums of Care Boards for approval (and also with the PA HMIS Lead Agency).

#### 2. Programming queries and generating regular data quality reports

The PA HMIS helpdesk was developed for System Administrators and/or Agency Manager(s) to contact the PA HMIS Administrator for technical assistance with issues or questions related to their program. The PA HMIS Administrator and PA HMIS IT Consultant have developed several reports and tools to aid System Administrators and Agency Manager(s) to correct and confirm data completeness and data accuracy, as well as annual reports that help communities identify gaps through system performance measurements adopted



by the Continuums of Care through the Department of Housing and Urban Development (HUD).

#### **ARTICLE 3: CONTINUUM OF CARE RESPONSIBILITIES**

The Continuum of Care's System Administrator or Agency Manager(s) should ensure consistent data collection and quality across all of the participating programs within their continuum or program(s). This can be achieved through some or all of the following mechanisms:

1. Continued Participation on PA HMIS Governing Board and/ or CoC data sub-committee;

These committees advise and support the COC's operations in the following programmatic areas: system performance measures and functionality; consumer trends and gaps in service deliver; and data quality assurance/accountability. To ensure that the data is consistent the PA HMIS Governing Board meets quarterly and the sub-committees meet monthly.

2. Conduct routine analysis/comparisons between programs.

Comparisons among the participating CoC programs can serve as a healthy competition to meet the standards the CoC agrees to. It can also serve to identify best practices in data quality and general usage.

3. Requiring monthly or quarterly reports generated from PA HMIS to verify timely data entry and quality.

Review and analysis of data through monthly/quarterly reports by the CoC's System Administrator or Agency Manager(s) is a way of galvanizing agencies and promotes a culture where data collection and quality is taken seriously. Going back six months later to catch up on data entry is a recipe for poor data.

PA HMIS reports can be used when verifying data accuracy during the review of program invoicing, upon which a provider sends in their invoice(s) to be processed. The CoC's System Administrator or Agency Manager(s) would verify timeliness of data entry, data quality and completeness, user's frequency of usage (determined by project type) and utilization of services by the consumer (determined by project type)



# ARTICLE 4: DATA COLLECTION REQUIREMENTS BY PROGRAM TYPE

This section shows the functionality of the list of the individual data elements and there elemental groupings that are required to be collected in PA HMIS for each Program Type. Data Elements that have an asterisks (\*) are not required for program reporting compliance but recommended by the PA HMIS Lead Agency.

#### RESIDENTIAL PROGRAMS

\*Includes Emergency Solutions Grant, Continuum of Care SHP Grants (Shelter + Care, Shelter + Care, Section 8/SRO)

## **Emergency Shelters (ES):**

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):

Housing Status, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Domestic Violence, \*Education Services Provided (If applicable)

#### **Program Exit:**

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem)

Transitional Housing (TH), Permanent Supportive Housing (PSH), Permanent Housing, Safe Haven (SH):

**Client Profile:** (the following data elements are required at entry)



Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):

Housing Status, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Domestic Violence, Residential Move-in Date,\*Education Services Provided (If applicable)

#### Program Exit:

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem)

### **Service Only Programs (SSO):**

\*Includes Supportive Services Only (with Housing Outcomes) Programs

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type): Housing Status, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Domestic Violence, Residential Move-in Date,\*Education

Services Provided (If applicable)



#### **Program Exit:**

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem)

# Projects for Assistance in Transition from Homelessness (PATH):

\*Includes Street Outreach Programs

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):

Housing Status, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Contact, Sate of Engagement, Services Provided-PATH Funded, Referrals Provided-PATH, PATH Status, Connection with SOAR,\*Education Services Provided (If applicable)

#### **Program Exit:**

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem)

# Runaway and Homeless Youth Program (RHY):

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven



**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):
Housing Status, Income and Sources, Non-cash Benefits, Health Insurance,
Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health
Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem),
Contact, Sate of Engagement, Services Provided-RHY, Referrals Provided-RHY,
RHY:BCP Status, Sexual Orientation, Last Grade Completed, School Status,
Employment Status, General Health Status, Dental Status, Mental Health Status,
Pregnancy Status, Formerly a Ward of Child Welfare/Foster Care Agency, Formerly
a Ward of Juvenile Justice System, Young Person's Critical Issues, Referral Source,
Commercial Sexual Exploitation,
Services Provided (If applicable)

#### **Program Exit:**

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Employment Status, General Health Status, Dental Status, Mental Health Status, Pregnancy Status, Transitional, Exit-care, or Aftercare Plan and Actions, Project Completion Status, Family Reunification Achieved

# Housing Opportunities for Persons with AIDS (HOPWA)

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Zip Code of Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):
Housing Status, Income and Sources, Non-cash Benefits, Health Insurance,
Disability Type (i.e., Physical Disability, Developmental Disability, Chronic
Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse
Problem), Domestic Violence, Residential Move-in Date,\*Education



Services Provided-HOPWA, Financial Assistance-HOPWA

## Program Exit:

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance, Disability Type (i.e., Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health Problem, Substance Abuse Problem), Medical Assistance

## Rural Housing Stability Assistance Program (RHSP)

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

**Enrollment:** Program, Program Enrollment Date, Worst Housing Situation;

# Veteran's Affairs Programs (VA)

# VA SSVF, VA Grant & Per Diem (GPD), and VA Supported Housing (VASH):

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

*Enrollment:* Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):
Housing Status, Income and Sources, Non-cash Benefits, Health Insurance,
Residential Move-in Date,\*Education, Services Provided-SSVF, Financial
Assistance-SSVF, Veteran Information, Percentage of AMI (SSVF Eligibility)



## Program Exit:

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance

# **Privately Funded Programs**

## Other [Non-State or Non-Federally Funded Programs]:

**Client Profile:** (the following data elements are required at entry)

Agency, Name, Social Security Number, Date of Birth, Race, Ethnicity, Gender, Veteran Status, Disabling Condition, Residency Prior to Project Entry, Relationship to Head of Household, Client Location, Length of Time on Street, in an ES or Safe Haven

**Client Enrollment and Exit** (the following data elements are required at enrollment and exit)

*Enrollment:* Program, Program Enrollment Date, Residence Prior to Entry, Length of Stay in Prior Residence, Last Permanent Address;

Program-Specific Data Elements (by Program – on Program Type):

Housing Status, Income and Sources, Non-cash Benefits, Health Insurance,
Residential Move-in Date,\*Education

#### Program Exit:

Program Exit Date, Destination, Reason for Leaving, Housing Assessment at Exit, Income and Sources, Non-cash Benefits, Health Insurance



#### **ARTICLE 5: Continuum Performance Measures**

The PA HMIS Lead Agency has put into place the following performance measurements from a variety of Federal, State and Local government reporting requirements to be in compliance for several Federal and State Regulations. These Continuum performance measures must be approved and adopted by All Continuums of Care participating in PA HMIS.

#### 1. PA HMIS Program Participation Rate

PA HMIS program participation rates should remain at an 86% or greater per project type. This measure is used to how encourage the CoC to build partnerships with non-participating PA HMIS agencies to collect and understand the homeless population served throughout the CoC.

## 2. Program Bed Utilization Rate

PA HMIS Bed Utilization Rate is used for reporting on the Annual Homeless Assessment Report (AHAR) and is generated from the Housing Inventory Count (HIC) pulled out of PA HMIS. The formula can be defined as the total number of programs participating in PA HMIS per Continuum divided by the overall number of programs with in the Continuum broken out by project type (i.e.- ES, TH, RRH, PH).

Bed utilization rates per project types are required to reach a rate of 60% or greater for participation in AHAR.

# 3. Program Data Quality Measure

PA HMIS Program Data Quality is required in order to remain compliant not have a total percentage of missing data of greater than 10 %. For data that is not missing although has a response of "Client Doesn't Know" or "Client Refused" is required to not have a percentage greater than 5%.

# 4. Program Participant Housing Stability Measure

Housing Stability Measures are used to help track and understand the gaps in service for those experiencing homelessness throughout the CoC gain a more permanent living situation through emergency and transitional living programs. The following outcome measures are set by each CoC's Data Management, Collection, and Outcomes Committee.



- 86% of cases exit to Permanent Housing from a Transitional Housing program;
- 50% of cases exit to Permanent Housing and/ or Rapid Re-Housing program from an Emergency Shelter program;
- 20% of cases exit to Permanent Housing from a Safe Haven program;
- 20% of cases exit to Permanent Housing Only from a Permanent Supportive Housing program.

#### 5. Program Participant Income Measure

Income Measures are used to help track and understand the gaps in service for those experiencing homelessness throughout the CoC to help increase their income. The following outcome measures are set by each CoC's Data Management, Collection, and Outcomes Committee.

- Total Income Outcome must be at a percentage of 40% or greater
- Earned Income Outcome must be at a percentage of 30% or greater

#### ARTICLE 6: PA HMIS SYSTEM PERFORMANCE MEASURES

As the system performance measures were outlined in Article 1.4 of this document the purpose of system performance measures is to take an in-depth look at each performance measure by identifying the PA HMIS's desired outcome and the client universe. The basic calculation for each of measure can be located in the <a href="CoC">CoC</a> Performance Measures Programming Specifications guide.

# Reporting Period

All PA HMIS System Performance measures will use the federal fiscal year (October 1 to September 30) for its reporting periods. To create a uniform standard for the PA HMIS CoCs and other PA HMIS funding source activities, the baseline year during and after which all PA HMIS Agencies regardless of funding stream are expected to be able to report data consistently. The baseline year is October 1, 2012 through September 30, 2013. In other words, for measures that require agencies to look at past client records in PA HMIS, the PA HMIS Lead Agency will not require participating agencies to report data on persons who were in their systems before October 1, 2012. For example, to determine the number of clients who are experiencing homelessness for the first time, the PA HMIS Lead Agency will only require participating agencies to look at persons who were in the system on October 1, 2012 or later, even if PA HMIS contains valid and reliable data from prior periods. HUD encourages communities with longer histories of reliable HMIS data to use data prior to the October 1, 2012 for their own internal analysis, but HUD will not request that data to be submitted as part of its official performance measures



submission to HUD. Although, the PA HMIS Lead Agency may request specific performance measures prior to October 1, 2012 for planning and monitoring purposes. For certain measures, participating agencies will simply provide HUD data for the report period as a benchmark with no comparison to prior periods. In subsequent years, HUD will generally compare data from year-to-year as well as data from past years. HUD intends to bring forward data reported in the past so that CoC's will not have to recalculate data from the past each year. While the PA HMIS Lead Agency plans to continue to use the federal fiscal year (i.e., October 1 through September 30) as its annual period, the PA HMIS Lead Agency may change the baseline in the future to ensure the measurement best reflects the efforts of the homeless system.

#### **ARTICLE 7: MONITORING**

The PA HMIS Lead Agency will develop a monitoring plan and strategy to present to the PA HMIS Governing Board to be reviewed, approved, and passed on to the CoC Board for final approval. The logic behind developing a plan to monitor data quality and functionality shall be specific to each CoC's specific needs and analysis of the data.

#### **ARTICLE 8: COMPLIANCE PLAN**

CoCs should use the following chart to enforce data quality, accuracy, and participation if a CoC program falls out of compliance:

TASK LIST	
Month 1: Goal: Assess Baseline of Compliance; Compliance Rate	
All Data Entered by Providers for previous month	
<ul> <li>Aggregate DQ Reports to PA HMIS System Administrator for review</li> </ul>	
• Data Quality Reports Reviewed by PA HMIS System Administrator/ Agency Manager(s)	
<ul> <li>Providers Correct Data in PA HMIS</li> </ul>	
<ul> <li>Revised aggregate Data Quality Reports Generated and Published to the CoC Public</li> </ul>	
Website – Quarterly	
<ul> <li>Data Quality Progress Report Developed</li> </ul>	
<ul> <li>Presentation of Data Quality Progress Report at General CoC Meeting – Quarterly</li> </ul>	
<ul> <li>Assess Training Needs and post Training Schedule/Plan on PA HMIS Homepage</li> </ul>	
dashboard	

**Continuation of Goals to Achieve:** (Tasks are repeated until program gains and maintains compliance with the data quality measures)

Month 4: Goal: Assess Baseline of Compliance; Compliance Rate = 88%

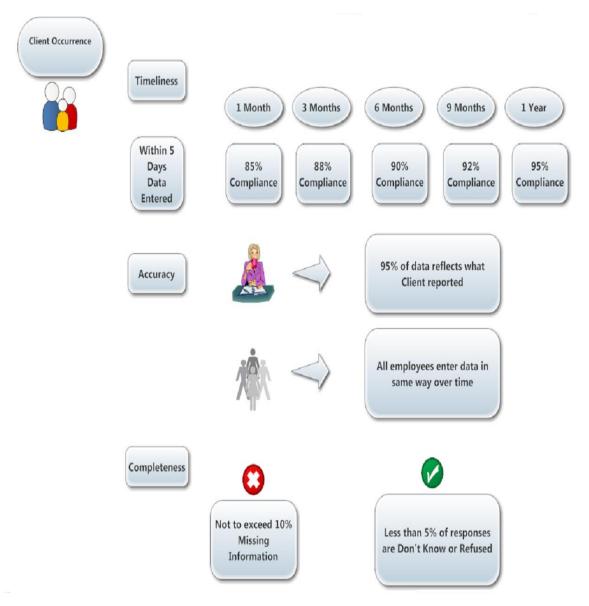
Month 7: Goal: Assess Baseline of Compliance; Compliance Rate = 90%



Month 10: Goal: Assess Baseline of Compliance; Compliance Rate = 92%

Month 12: Goal: Assess Baseline of Compliance; Compliance Rate = 95%

When the goal of 96% compliance rate is achieved, the compliance measure should be maintained and then the responsible party would is the general PA HMIS user to achieve



100% compliance rate for all data entered in PA HMIS.