



Data Quality Management Program (DQMP) Part 1: Overview of a DQMP

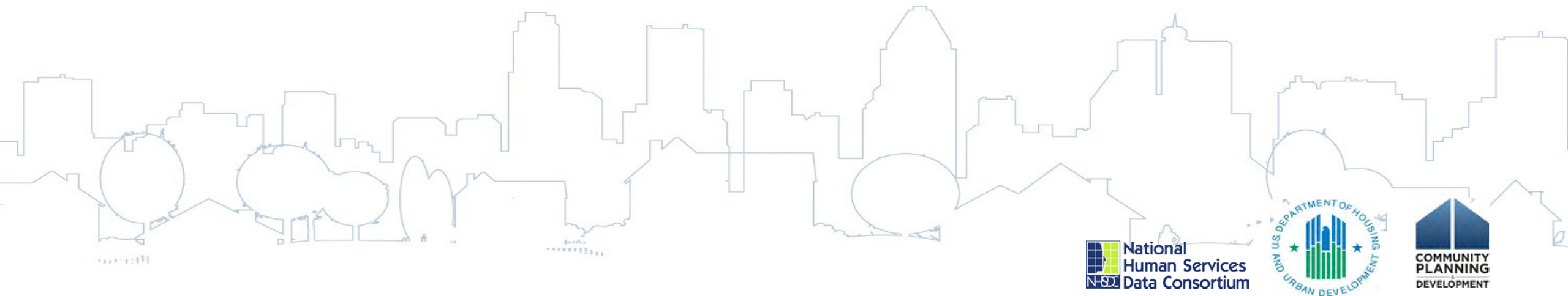
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&
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About NHSDC

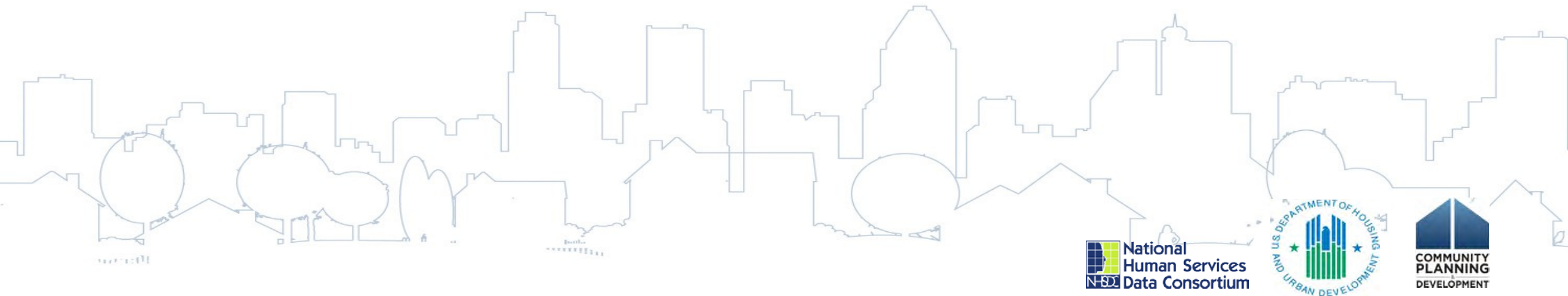
The National Human Services Data Consortium (NHSDC) is an organization focused on developing effective leadership for the best use of information technology to manage human services. NHSDC provides information, assistance, peer to peer education and lifelong learning to its conference participants, website members and other interested parties in the articulation, planning, implementation and continuous operation of technology initiatives to collect, aggregate, analyze and present information regarding the provision of human services.

NHSDC holds two conferences every year that convene human services administrators primarily working in the homeless services data space together to learn best practices and share knowledge. The past 3 events have been put on with HUD as a co-sponsor. Learn more on our web site www.nhsdc.org.



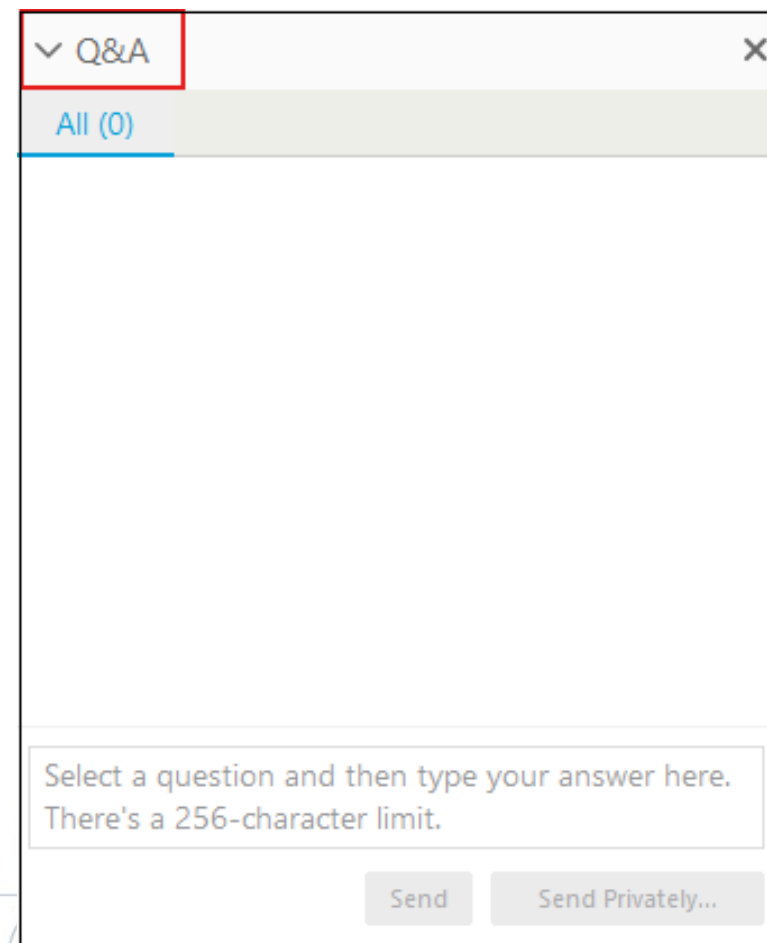
Webinar Instructions

- Webinar will last about 60 minutes
- Access to recorded version
- Participants in 'listen only' mode
- Submit content related questions in Q&A box on right side of screen
- For technical issues, request assistance through the Chat box



Questions?

- Please submit your content related questions via the Q&A box
- Send to Host, Presenter and Panelists

A screenshot of a Q&A interface. At the top, there is a tab labeled 'Q&A' with a downward arrow and a close button 'X'. Below the tab is a header 'All (0)'. The main area is a large empty text box. At the bottom, there is a text input field with the placeholder text 'Select a question and then type your answer here. There's a 256-character limit.' Below the input field are two buttons: 'Send' and 'Send Privately...'.

Q&A

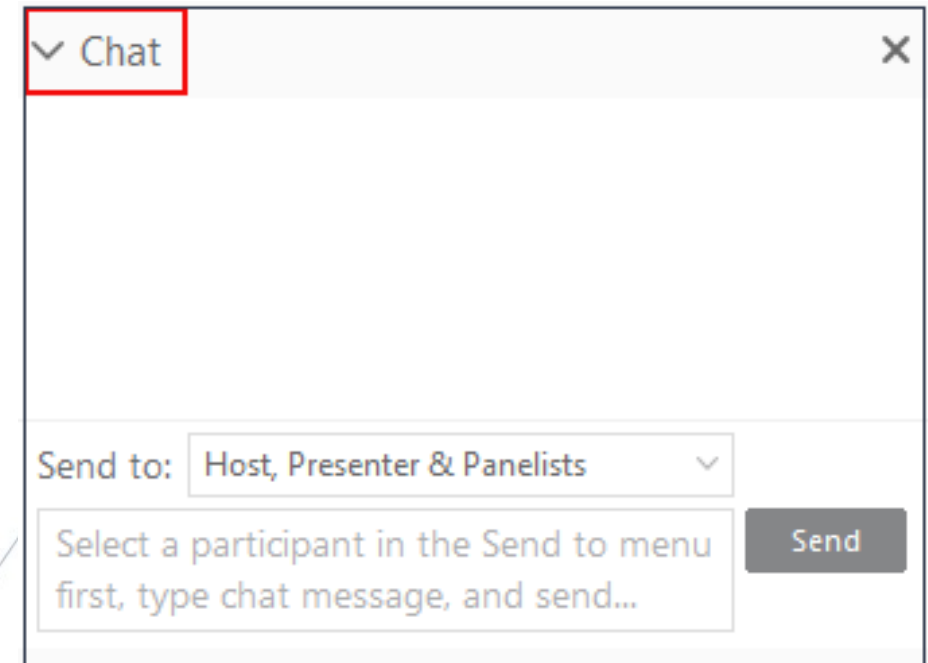
All (0)

Select a question and then type your answer here.
There's a 256-character limit.

Send Send Privately...

Chat

- Please submit any technical issue related questions via the Chat box
- Send the message directly to the Host
- Host will work directly with you to resolve those issues



Chat

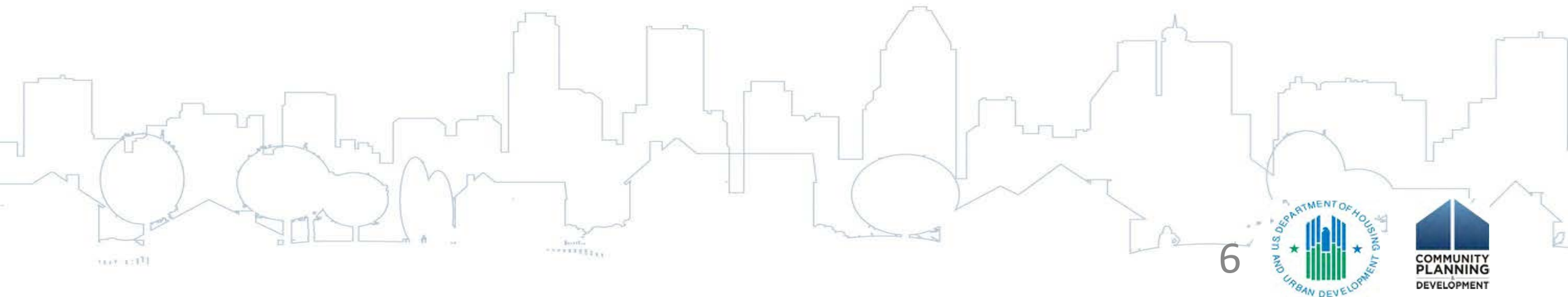
Send to: Host, Presenter & Panelists

Select a participant in the Send to menu first, type chat message, and send...

Send

Learning Objectives

- Understand HUD's vision and strategy for data and understand how data quality fits into that context
- Identify the role that the CoC, HMIS Lead, HMIS Vendors, and HMIS Participating Organizations/Users play in ensuring high data quality
- Discuss the core elements, definitions, and metrics of data quality



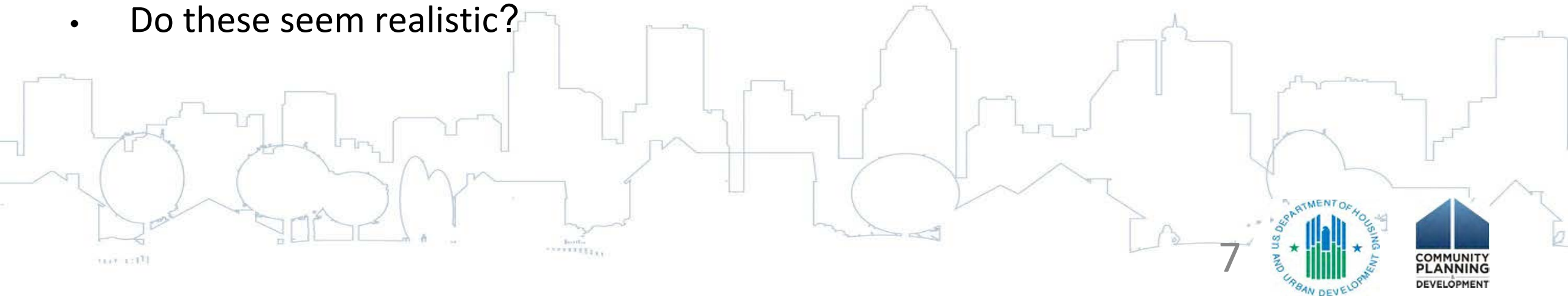
SNAPS Data TA Strategy

HUD SNAPS Data TA Strategy to Improve Data & Performance

Data Quality is implicated in all three strategies

Let's talk for a second

- Who has seen this?
- How does it make you feel?
- Do these seem realistic?



Strategy # 1

Characteristic: Expert Homeless Management Information System (HMIS) Leads and System Administrators

Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none"> Software provider: HMIS Leads are entrusted by CoCs to manage software provider contracts/relationships, and act as fiduciary on behalf of the CoC End User: HMIS Leads support all end users and administrators meet DQ standards (Strategy 2) CoCs: HMIS Leads ensure data is high quality for use in planning/review and ranking 	<ul style="list-style-type: none"> Software provider: HMIS Leads monitor software providers to the terms of the contract, or are provided with accreditation by software providers End User: HMIS Leads have developed training curricula to meet the unique needs of beginner, intermediate, and advanced users CoCs: HMIS Leads support data literacy across CoC planning 	<ul style="list-style-type: none"> Software provider: HMIS Leads conduct frequent monitoring of software providers and have access to all programming specs/logic, terminology assumptions, and report generation functionality End User: HMIS Leads collect data from end users pre- and post-training, and use the results to enhance training curricula and delivery CoCs: HMIS Leads provide/manage/merge and de-duplicate high quality data to support cross-system care coordination and planning efforts

Characteristic: CoCs have data-driven leaders

Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none"> CoC has a data subcommittee 	<ul style="list-style-type: none"> CoC shares a vision to end homelessness CoC supports culture of performance 	<ul style="list-style-type: none"> CoCs are engaged with and sharing data and performance metrics across systems of care



Strategy # 2

Characteristic: Bed Coverage across Continuum (funded and unfunded)

Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none"> 100% required providers and less than 100% non-required providers contribute to HMIS 	<ul style="list-style-type: none"> 100% all homeless service providers contribute to HMIS 	<ul style="list-style-type: none"> 100% homeless providers and non-homeless service providers contribute to shared data environment

Characteristic: Quality data = Timely Accurate Comprehensive

Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none"> 100% complete Less than 100% accurate No timeliness standard 	<ul style="list-style-type: none"> 100% accurate 100% complete Projects directly enter data within 2 hours for crisis response and project start/project exit PSH projects directly enter data within 24 hours 	<ul style="list-style-type: none"> 100% accurate Customized local data elements are limited to information needed to report, serve and house clients. 100% complete Timeliness meets Coordinated Entry placement and referral needs



Strategy # 3

STRATEGY 3:

Continuums and stakeholders use data to improve efforts to end homelessness

Characteristic: Continuum of Care (CoC) uses data for system planning		
Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none">Using project-level performance data to make rating and ranking decisions and set local performance goals	<ul style="list-style-type: none">Aligning homeless system resources to meet needs of people experiencing homelessness	<ul style="list-style-type: none">Using all data sources (including data from non-homeless systems of care) to prevent and end homelessness
Characteristic: Continuum of Care (CoC) uses data for coordination of care		
Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none">Multiple homeless providers coordinating to provide housing and services to individuals (or groups of individual)	<ul style="list-style-type: none">All homeless providers removing systemic barriers to housing and services	<ul style="list-style-type: none">Homeless providers and non-homeless systems of care coordinating to remove systemic barriers to housing and services
Characteristic: Continuum of Care (CoC) uses data to prioritize existing resources for neediest clients		
Current status (or near-term)	Majority of CoCs in 3-5 years	Advanced CoCs in 3-5 years
<ul style="list-style-type: none">HUD defines vulnerability (to what) and communities are using all available resources for most vulnerable persons	<ul style="list-style-type: none">Homeless system uses RRH for progressive engagement and 100% of PSH is highly targeted	<ul style="list-style-type: none">Data from non-homeless systems of care is used to prioritize highly vulnerable persons, plus highly targeted prevention (based on local evidence)



Poll Question

- What strategy do you spend most your time working towards?
 - Strategy 1: HMIS Capacity
 - Strategy 2: Data Quality
 - Strategy 3: Using HMIS Data

Definition of Data Quality

Data quality refers to the reliability and comprehensiveness of a community's data, as collected in HMIS

- Do you have sufficient data to accurately reflect the demographics, needs, experiences, and outcomes of persons experiencing homelessness in your community?

Impacts of not having sufficient data quality

- Inability to leverage data for system planning and design efforts
- Frustration with HMIS; viewed as a burden and not a resource

Components of data quality:

- Completeness (including system coverage)
- Timeliness
- Accuracy
- Consistency

Requirements for Data Quality

Per the 2004 HUD Data and Technical Standards:

4.2.2 Data Quality

Baseline Requirement: “PPI collected by a CHO must be relevant to the purpose for which it is to be used. To the extent necessary for those purposes, PPI should be accurate, complete, and timely.”

[2004 Data & Technical Standards](#)

Requirements for Data Quality

Per the CoC Program interim rule:

578.7 Responsibilities of the Continuum of Care

(b) *Designating and Operating an HMIS*. The Continuum of Care must:

- (1) Designate a single Homeless Management Information System (HMIS) for the geographic area;
- (2) Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead;
- (3) Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.

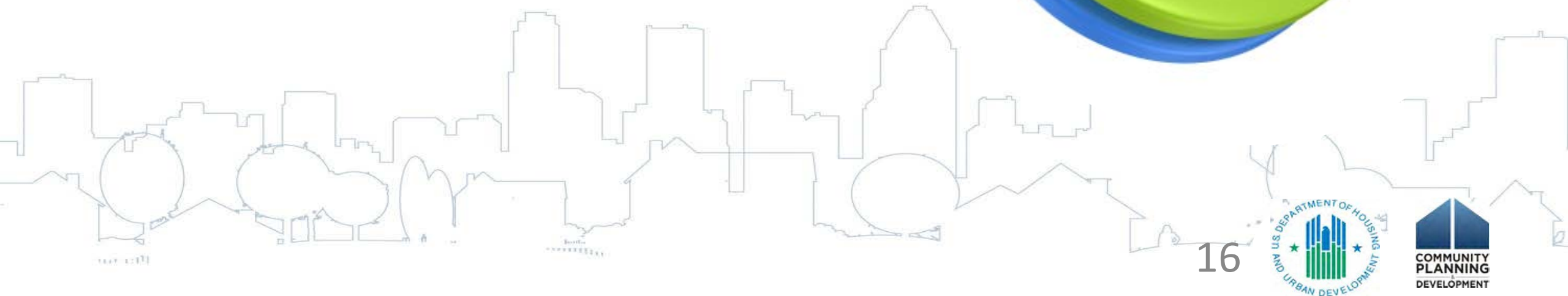
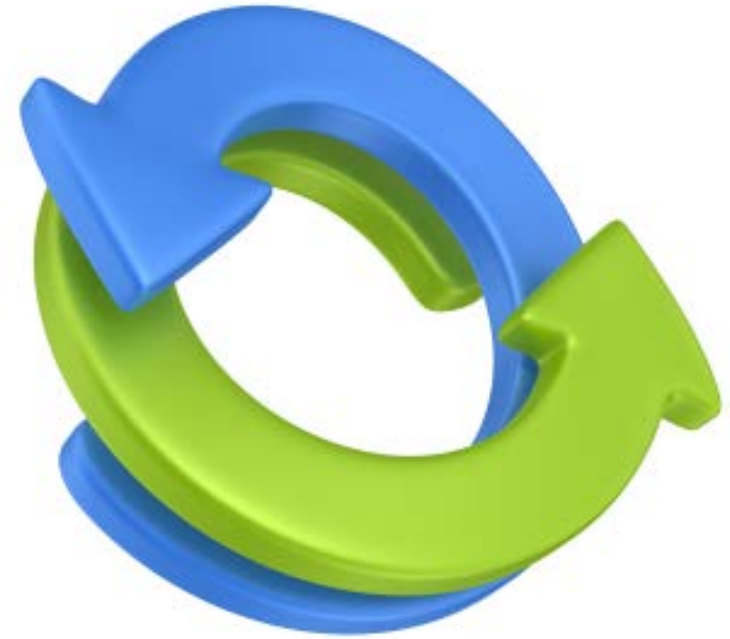
[CoC Program interim rule](#)

Roles and Responsibilities for Data Quality



Why a Data Quality Management **Program**?

- It's a process
- Iterative
- Continuous
- Actionable
- Measurable
- Never stops evolving



What is a DQMP?

Identifying your
Baseline

Ensuring CoC
Buy-In

Develop your
DQ Plan

Set enforcement
and
improvement
expectations

Execute
Enforceable
Agreements

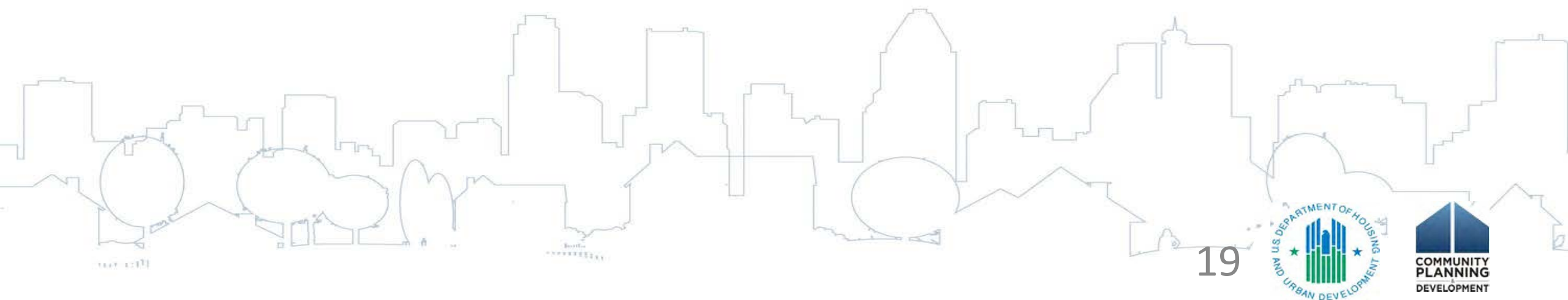
Ongoing
monitoring and
continuous
improvement

Phase 1: Identifying your Baseline

- Identify your baseline across all components of data quality
 - DQ Framework report can be leveraged for completeness, timeliness
 - Accuracy is often the hardest to measure
 - Think about ways to have data checked by other stakeholders to ensure accuracy (includes sharing data at meetings and doing monitoring)
 - Consistency is also very hard to measure
 - Consider how well you are training users on data collection, look at help tickets, training evaluations, etc. to get a sense of how well users are understanding the various data collection and workflow requirements for HMIS

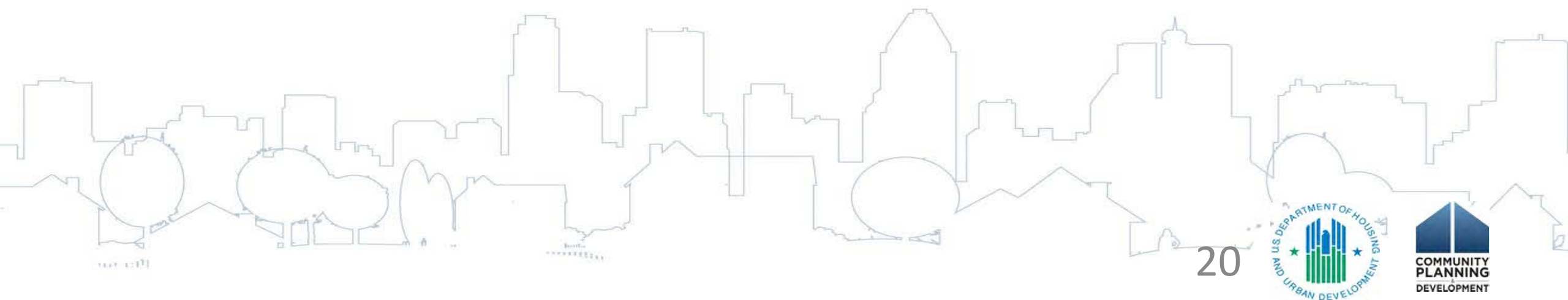
Discussion on Baseline

- What's been your biggest struggle with determining your baseline for data quality?
- ***Please type your responses into the Chat box!***



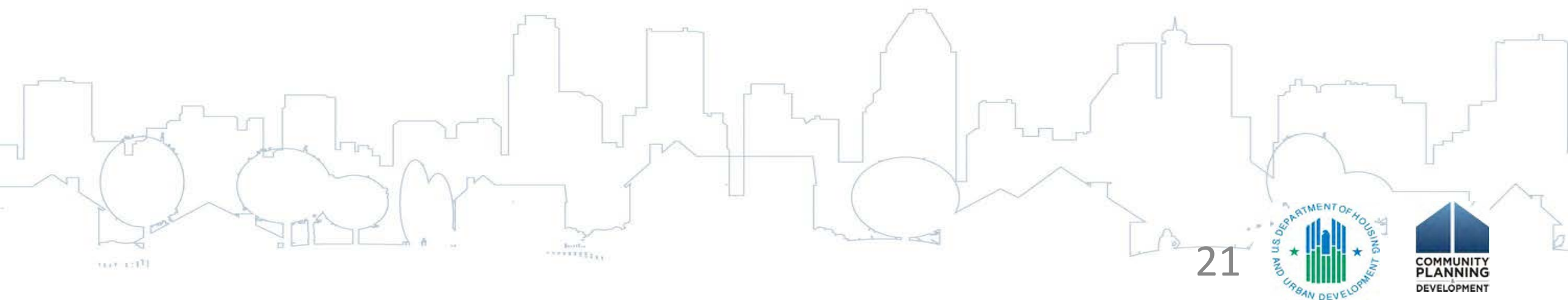
Phase 2: Ensuring CoC Buy-In

- Important to clarify up front what the expectations are for the DQMP
 - CoC will need to review and approve the DQ Plan
 - CoC should also be heavily involved in determining expectations for monitoring and compliance



Discussion on Ensuring CoC Buy-In

- How frequently does your CoC leadership review data quality reports and data analysis?
- Does your CoC leadership see value in HMIS? Are they champions of the system? If not, how can you address that during Phase 2?

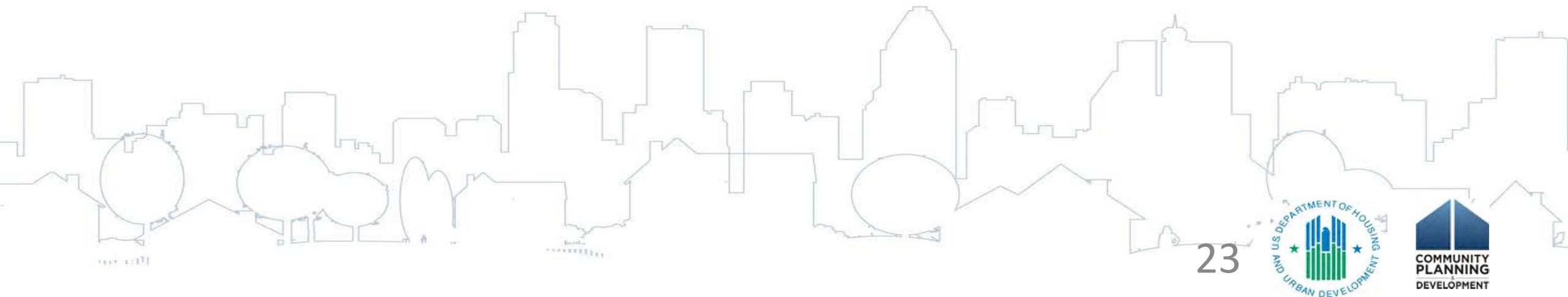


Phase 3: Develop Your DQ Plan

- Define DQ expectations across all four components of DQ
- Note any distinctions between DQ expectations based on differences in project type and/or data element
- Set expectations of user agencies, of the HMIS Lead Agency and of the CoC
 - Monitoring, compliance, reporting, performance, etc.
- Don't develop it alone! Get stakeholder feedback and input
- Align your expectations with HUD's in its strategy

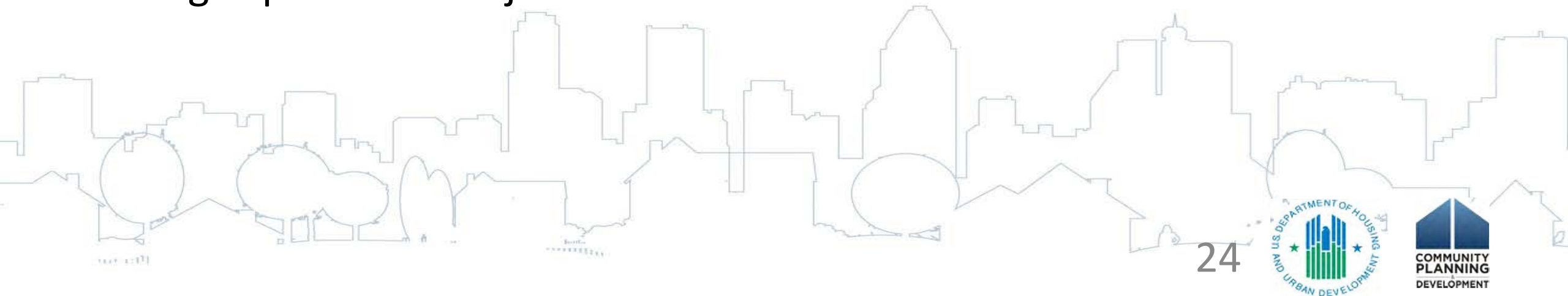
Discussion on DQ Plan

- What was your process for developing your DQ Plan? For updating it?
- Does the DQ Plan seem to be in alignment with the HUD Data Strategy?



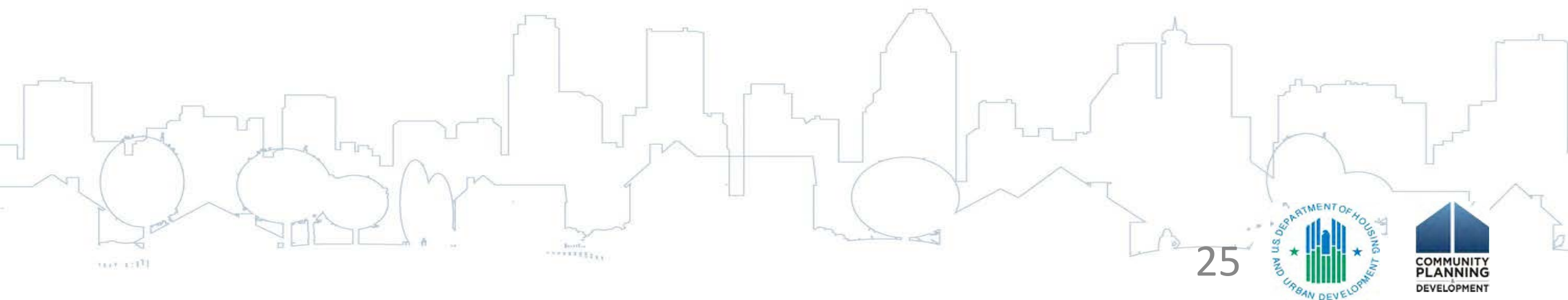
Phase 4: Expectations for Enforcement

- These should be developed in collaboration with the CoC
- Consider both how you'll support agencies/users and if there will be any period of gradual enforcement
- Explore ways that other funds can encourage improved data quality
- Be prepared for this to take some time; writing the DQ Plan and setting expectations is just the start of this work



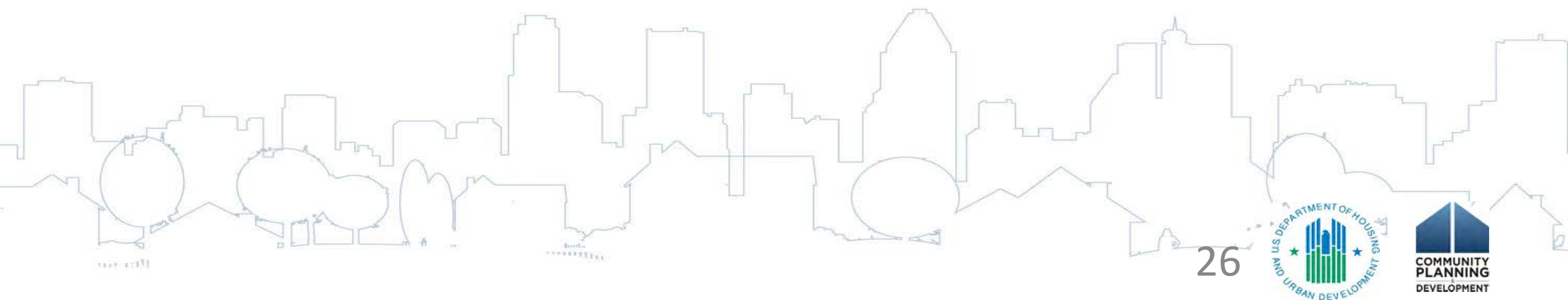
Discussion on Enforcements

- How do you incentivize and encourage more success with your DQ Plan expectations?
- Have you had to take action against agencies that aren't performing well? What was that like?



Discussion on Baseline

- What's been your biggest struggle with determining your baseline for data quality?
- ***Please type your responses into the Chat box!***



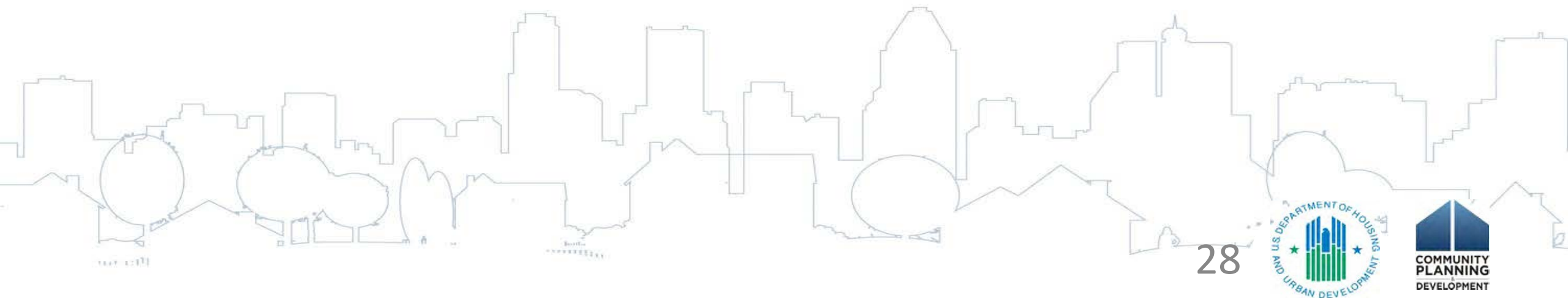
Phase 5: Enforceable Agreements

- Should be completed by all agencies participating in HMIS
- Provide guidance on what the consequences are for failure to meet the standards in the DQ Plan, as well as the incentives
- Identify the process for notification of failure to meet a standard
- Provide training and ongoing communication on expectations in both agreements and DQ Plan

Discussion on Agreements

- Do you have agreements in place? How often are they completed?
- Have you rolled out training and communications on your DQ efforts? What did that look like?

Please type your responses into the Chat box!

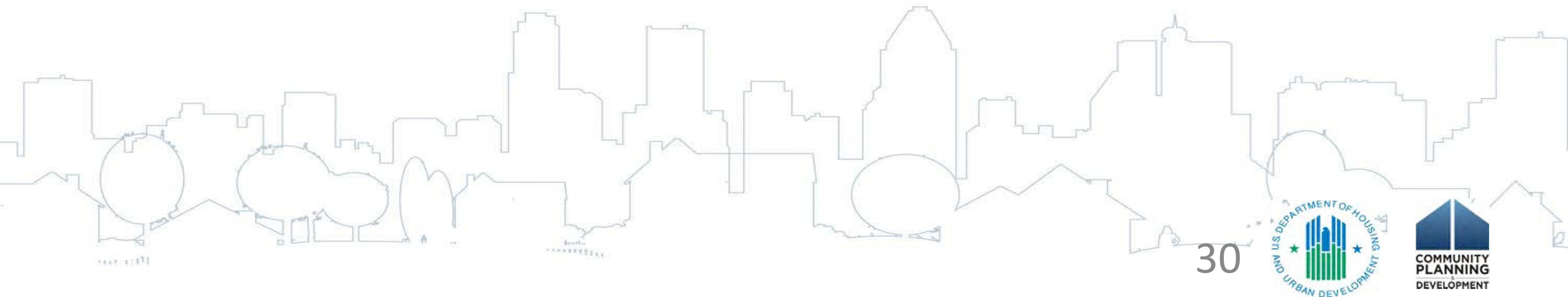


Phase 6: Ongoing Monitoring and Continuous Improvement

- Transparency with results is key; consider who will run reports (HMIS Lead? Agencies), how often they will be run and where they will be shared
- Monitoring should be done against all components of data quality; can be self-monitoring as well as done by a third party (such as the HMIS Lead)
- Establish a tool for monitoring, clarify how often it will be done and share your results

Discussion on Monitoring and Continuous Improvement

- How do you monitor for data quality?
- How is this work connected back to the broader CoC's efforts to end homelessness?



Next Steps

- Attend Part 2, where we'll go into depth on how to establish your DQMP
- Don't wait for perfection, start making progress now
- Think of this as an iterative and ongoing process
- Use your DQMP Action Planning worksheet
- Be on the lookout for a HUD resource on DQMPs

Additional Questions



Thank you!

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