

**GEOCODE 489303 & 483288**

Continuum of Care Policies and Procedures

# Data Quality Plan

Lubbock County & City CoC TX-625

**Lubbock City & County CoC TX-625**  
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Versions

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## **Introduction**

This document describes the Homeless Management Information System (HMIS) data quality plan for Echo West Texas (ECHO) and The Lubbock County & City Continuum of Care, TX-625, (CoC). HMIS is a locally administered electronic system that stores client-level information about persons who access homeless services in a community. This document outlines a Data Quality Plan with protocols for ongoing data quality monitoring that meet requirements set forth by the Department of Housing and Urban Development (HUD) as well as outline the ownership and governance of data entered into the HMIS. It is developed by the HMIS Lead (ECHO), the CoC in coordination with the CoC database advisory committee, and community service providers. This data governance and quality plan will be updated annually, considering the latest HMIS data standards and locally developed Data Quality Thresholds.

Data Quality refers to the reliability and validity of program and client level data collected in the HMIS. With good data quality, a community can “tell the story” of the population experiencing homelessness. The quality of data is determined by assessing data characteristics such as timeliness, completeness, and accuracy.

A data quality plan is a community-level document that assists the CoC in achieving statistically valid and reliable data. The plan sets expectations for both the community, the end users, and:

- Establishes specific data quality benchmarks for timeliness, completeness, accuracy, and consistency; identifies responsibilities of all parties within the CoC with respect to data quality
- Establishes a timeframe for monitoring data quality on a regular basis

This data quality plan is a set of procedures that outlines a regular, on-going 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. This plan includes roles and responsibilities for the CoC, the HMIS Lead, and the HMIS advisory committee.

### ***HMIS Data and Technical Standards***

All CoCs are required to implement and participate in HMIS to capture standardized data about all persons accessing homeless assistance in the area. An HMIS must comply with HUD’s official guidance on data and technical standards published on HUD’s resource exchange.

HUD standards identify Universal Data Elements and Program-Specific Data Elements that are required for all programs participating in the HMIS. Additional details can be found at <https://www.hudexchange.info/resource/3824/hmis-data-dictionary/>.

HUD measures the following metrics which directly affect funding and are critically affected by data quality:

- Length of time persons remain homeless
  - Average & median length of time people spend in homeless situations

- Is the time period getting shorter, longer, or staying the same?
- Extent to which persons who exit homelessness to permanent housing destinations return to homelessness
  - % of persons exiting to permanent housing and return to homelessness within 6-12 months and 24 months
- # of homeless persons
  - Taken from HMIS & pit count
- Employment & income growth for homeless persons in CoC funded projects
  - Does not include non cash income sources like SNAP
- # of persons homeless for the first time
  - Not been served by homeless system in 2 prior years
- Homelessness prevention and housing placement of persons defined by category 3 of HUD's homeless definition in CoC projects
  - % of persons that are homeless under federal law that return to homelessness and exit to or retain permanent housing from CoC funded projects
- Successful placement from street outreach
  - Success of street outreach projects in placing people into housing and success projects have at exiting clients to permanent housing

(refer to the most recent HUD NOFO and the CoC NOFO Policies and Procedures for more information)

### ***Rationale***

Collecting data in the human service field has its challenges; clients may present as distraught, scared, or confused. It can be difficult to obtain accurate information from them, but case managers and others working with these clients should understand the importance of obtaining accurate information from all clients they serve. Without good information, it is difficult to assess client needs and determine the appropriate level of care for the individual or family.

It is important that case managers work with their clients to gather timely, complete, and accurate data. For example, most homeless service providers collect information on a client's military service history, or veteran status. This information can help case managers make the appropriate referrals and alerts them to specific benefits the client may be eligible for. If a case manager does not know the veteran status of a client, a piece of their story is missing.

Assessing how many client records have blank or missing data elements helps analyze how reliable the data is. The more clients with missing or incomplete information, the less valid the data is to make generalizations about the population served.

Each component of this plan includes a benchmark– a quantitative measure used to assess reliability and validity of the data. For example, the community may decide to set the benchmark for a missing (or null) value for a certain data element at 5%. This would mean that

no more than 5% of all client records in the system should be “missing” a response to a particular data element.

Any HMIS participating organization is required to enter 100% of their participating clients in HMIS. This can help give the community a better view of what is happening and address service needs as a whole.

## Data Quality Benchmarks

### ***Timeliness:***

Entering data in a timely manner reduces human error that occurs when too much time has elapsed between the data collection (or service transaction) and the data entry. The individual doing the data entry may be relying on handwritten notes or their own recall of a case management session, a service transaction, or a program exit date; therefore, the sooner the data is entered, the better chance the data will be correct.

Timely data entry also ensures that the data is accessible when it is needed, either proactively (e.g. monitoring purposes, increasing awareness, meeting funding requirements), or reactively (e.g. responding to requests for information, responding to inaccurate information).

- **Intake data**, along with Universal Data Elements, should be entered into the HMIS within 2 working days of the intake process.
- **Shelters only:** Clients who stayed in the previous 24-hour period must be entered into the HMIS within 24 hours.
- **Housing projects other than emergency shelters:** Program specific data and housing check-in/check-out must be entered within 4 calendar days of the event.
- **Supportive Services:** Universal and program specific data elements must be entered within 4 calendar days of the event
- **Outreach Projects:** Limited data elements must be entered within 4 calendar days of the first outreach encounter. Universal data elements should be collected at the time of client’s engagement in services.
- **Annual Assessments:** Assessments that are required for collection must be entered and completed no more than 30 days before or after the anniversary of the head of household’s Project Start Date.
  - The annual assessment must include updating both the head of household’s information and any other family member associated with the enrollment at the same time.
  - The data included in these updates impact the CoC’s System Performance Measures (SPMs) which contribute to HUD’s scoring process to determine local funding levels.
  - **Programs/Projects receiving CoC funding** are required to conduct these assessments. Others providing housing and/or housing assistance not funded by the CoC are encouraged to do so as well.

## ***Completeness:***

Completeness refers to entry of all clients served by an organization's project, as well as all the necessary data elements. Complete data is the key to assessing and assisting clients in finding the right services and benefits to end their homelessness. Incomplete data will hinder an organization's ability to provide comprehensive care to the clients it serves. Incomplete data can also negatively impact the CoC's ability to make generalizations of the population it serves, track patterns in client information and changes in the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG funding. Low HMIS data quality scores may impact, and could result in denial of future funding requests.

The goal of the CoC is to collect 100% of all data elements at the client and program level. The HMIS advisory committee, with approval from the CoC Board, has established the following Data Quality Thresholds which set an acceptable range for "null/not collected", "client doesn't know/client refused to answer", and misrepresentative data (i.e. 111-11-1111 for SSN):

- Collection of Social Security Numbers is exempt from these collection thresholds; while partial SSN (i.e. last 4 of SSN) collection is recommended to enable easier client search and match, the collection of SSN will not be held to the below standards in the interest of client privacy.
- The standard is set at 5% missing/null/doesn't know/incomplete answers for any and all project and client level data elements.
  - The HMIS advisory committee, with approval from the CoC Board, has set January 1, 2026 as the date enforcement of the Data Completeness/Quality Standard at 5% will be enforced in scoring and funding requirements.
- Each agency and its programs/projects are strongly encouraged to monitor the completeness and accuracy of their data at least monthly and correct errors accordingly
- Each agency and its programs/projects will be evaluated quarterly and given a report on the completeness of their entered data for the previous months, keeping in mind the goal of 5% or less incomplete data by January 2026
  - Refer to the "monitoring" section of this document

## ***Bed Utilization Rates:***

One of the primary features of an HMIS is the ability to record the number of client stays or bed nights at a homeless residential facility. Case managers or shelter staff enter a client into the HMIS and assign them to a bed and or a unit. The client remains there until they exit the program. When the client exits the project, they should also be exited from the bed or unit in the HMIS.

Bed Utilization is calculated as the number of beds occupied divided by the total number of beds. Low utilization rates could indicate the residential facility is not very full, but it could also mean the HMIS data is not being entered for every client served. High utilization rates could

mean the provider is over capacity, but it could also mean the program has not properly exited clients from the system.

The CoC recognizes that new projects may require time to reach the projected occupancy numbers and will not expect them to meet the utilization rate requirement during the first six months of operation.

Acceptable range of utilization rates:

- Emergency shelters/Transitional housing: 80%-105%
- Permanent supportive housing/Safe Havens: 85%-105%

### ***Accuracy:***

The purpose of accuracy is to ensure that the data in the HMIS is the best possible representation of reality as it relates to homeless persons and the programs that serve them.

Staff entering information into the HMIS must enter information as stated by the client. Every agency must enter data on clients in the same way over time, regardless of which staff person is recording the data in HMIS. Recording inaccurate information is strictly prohibited.

The best way to measure accuracy of client data is to compare the information reported to something verifiable such as a driver's license, or social security card, etc. To ensure the most up-to-date and complete data, data entry errors should be corrected on a monthly basis.

Inaccurate/misrepresented data is considered invalid and will be counted against the data completeness scoring. For example, it is better to select “client doesn’t know/refused” than to misrepresent the population; entering 111-11-1111 or 123-45-6789 for SSN is considered invalid and will be counted as incomplete data as well as a misrepresentation of client information.

### ***Consistency:***

Consistent data promotes accuracy. All data in HMIS should be collected and entered in a common and consistent manner across all programs. To this end, agency intake and data entry staff should complete an initial training before accessing the live HMIS system, and access/attend additional training opportunities offered by the HMIS Lead & CoC.

The HMIS staff may check data accuracy and consistency by running reports that check for entry errors such as duplicated records, overlapping enrollments or inconsistent assessment responses. The CoC reserves the right to use client identification numbers for program auditing or monitoring purposes.

### ***Monitoring:***

- Participating agencies are encouraged to run data quality reports prior to the 5th of each month and address any issues prior to reporting by the system administrator
- The system administrator will send a quarterly data quality report to the agency/program point of contact by the 5th business day of each quarter with increasing frequency for housing providers close to reporting deadlines.
  - Receipt of the report should be acknowledged by the 10th of each month.
  - Any data corrections made should be reported to the system administrator by the 15th of each month
  - Should there be no acknowledgement of receipt by the 10th, an email reminder will be sent out the next business day. If there is still no acknowledgement of receipt within 3 business days from the reminder, the System administrator or CoC Lead's executive director will reach out to the agency's executive director.
- Should a project/program's incomplete data rate rise above 5% for two consecutive quarters, the HMIS data team will meet with the agency's point of contact, executive director, or their designee, to establish a data quality improvement plan with the goal of reducing the rate of incomplete data to below 5% within 2 months (60 days) after the establishment of the data quality improvement plan.
- A community-wide report will be created and reported to the community at least annually for the purposes of receiving feedback on challenges and progress.
- Community-wide reports will be run and reported quarterly to the HMIS advisory committee.

**Resources:**

HMIS Data Dictionary/Manual:

<https://www.hudexchange.info/resource/3824/hmis-data-dictionary/>

HMIS Data and Technical Standards:

<https://www.hudexchange.info/programs/hmis/hmis-data-and-technical-standards/>

HUD Data Quality Brief:

<https://www.hudexchange.info/resource/5293/CoC-data-quality-brief/>

Data Quality and Analysis for System Performance Improvement Brief:

<https://www.hudexchange.info/resource/5291/system-performance-improvement-briefs/>

Homeless Definitions:

[https://files.hudexchange.info/resources/documents/HomelessDefinition\\_RecordkeepingRequirementsandCriteria.pdf](https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf)

HUD Data Strategy Resources:

<https://www.hudexchange.info/homelessness-assistance/data-strategy-usability/>