Charlotte-Mecklenburg

Homeless Management InformationSystem (HMIS)

Data Quality Standards and Management Plan

Approved by: CoC Governing Board

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Introduction

This document describes the Homeless Management Information System (HMIS) data quality standards and the data quality-monitoring plan for Charlotte-Mecklenburg Continuum of Care (CoC). This document is developed for HMIS Contributing Homeless Organizations. These HMIS Data Quality Standards and the related data quality-monitoring plan will be updated annually, considering the latest HMIS data standards.

Development Process

The Charlotte-Mecklenburg Continuum of Care Homeless Management Information System (HMIS) Sub-committee of the Data Advisory Committee developed the following policy standards and subsequent procedures of data usage for all Charlotte-Mecklenburg County HMIS users and user agencies. The data quality standards will serve to maintain or improve the data quality of the data entered into the Homeless Management Information System. All agencies are responsible for maintaining their own compliance with federal regulations as well as any outside applicable regulations such as the Health Insurance Portability and Accountability Act (HIPAA) standards.

Applicability of HMIS Data Standards

This HMIS Data Quality Standards document applies to all HMIS participating agencies located within the CoC, regardless of funding source. No HMIS participating provider is exempt from the standards or process laid out in this document.

What is an HMIS?

An HMIS is a locally administered, electronic data collection system that stores

longitudinal person-level information about the individuals who access homeless and other human services in a community. Each CoC receiving Housing and Urban Development (HUD) funding is required to implement an HMIS to capture standardized data about all persons accessing the homeless and at-risk of homelessness assistance system. Furthermore, elements of HUD's annual CoC Program competition are directly related to a CoC's progress in implementing its HMIS.

In addition to CoC Programs, HMIS accommodates the following programs:

- Emergency Solutions Grants (ESG) program
- Housing Options for Persons with AIDS (HOPWA) program
- HUD-VA Supportive Housing (HUD-VASH) program
- Projects for Assistance in Transition from Homelessness (PATH) program
- Runaway and Homeless Youth Management Information System (RHYMIS)
- The Supportive Services for Veteran Families (SSVF) program

HMIS Data Quality and Technical Standards

In 2004, HUD published HMIS Data and Technical Standards in the Federal Register. The Standards defined the requirements for data collection, privacy safeguards, and security controls for all local HMIS. In March 2010, HUD published changes in the HMIS Data Standards Revised Notice incorporating additional data collection requirements for the Homelessness Prevention and Rapid Re-Housing Program (HPRP) funded under the American Recovery and Reinvestment Act (ARRA). The current HMIS Data and Technical Standards can be found at
https://www.onecpd.info/resource/1220/finald-hmis-data-standards.

What is Data Quality?

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 data in the system reflects actual information in the real world. With good data quality, the CoC can "tell the story" of the population experiencing homelessness. The quality of data is determined by assessing the data for timeliness, completeness, and accuracy.

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

What are Data Quality Standards?

Data quality standards set expectations for the quality of data entered into the HMIS and provide guidance to HMIS participating providers on how to capture and enter reliable and valid data for persons accessing the homeless assistance system.

HMIS Software

The WellSky software product, ServicePoint, has been adopted by the Charlotte-Mecklenburg Continuum of Care (CoC) as the official HMIS for CoC providers. For the purposes of this document, HMIS refers to ServicePoint and all modules, assessments, and reporting capacities, standard or customized, contained therein

Data Quality Standards

The Data Quality Standards for the Charlotte-Mecklenburg Continuum of Care (CoC) are outlined in this plan are applicable to all projects participating in HMIS, with exceptions as noted under each standard. Unless otherwise noted, all participating projects are expected to achieve and maintain the data quality standards; this also includes those projects that are not funded by HUD or other governmental funding bodies. These standards are in addition to those identified by HUD in the HMIS Data and Technical Standards. HMIS Users and program staff should be familiar with both sets of requirements.

Timeliness

Entering data in a timely manner can reduce human error that occurs when too much time has elapsed between the data collection/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. Entering data as close as possible to the incident or activity is also essential to the effectiveness of the Coordinated Entry System (CES). It is important for the By Name List generated from HMIS to have accurate data on individuals and households experiencing homelessness and those who have entered permanent housing. Timely data entry ensures data accuracy and ensures that the data is accessible when it is needed, either proactively (e.g. monitoring purposes, increasing awareness, meeting funded requirements), or reactively (e.g. responding to requests for information, responding to inaccurate information).

Data Timeliness Standard

All required data elements for each program type must be entered within three business

days of data collection, incident, or activity. This includes intake as well as any client updates that occur during the program stay. Client records must be closed within 3 days of the client exiting the program. When a client is exited from a project in HMIS, they should be exited as of the date they last utilized the bed/services provided by the project. (For example, if a client last received services from a project on 1/10/2021, they should be exited from the project on 1/10/2021, even if the user is doing the data entry on a future date.) This helps ensure clients are not perpetually enrolled in a project in HMIS despite no longer being served, which assists in providing exact locations for clients when trying to house them through Coordinated Entry. If a client returns to a project, a new Entry record should be created.

Stage of Data Entry	Number of Days to Enter Data (including weekends and holidays)
Program Entry	3
Update data during program stay	3
Program Exit	3

Data Completeness

The purpose of completeness is to ensure sufficient data on clients, their demographic characteristics, and service use to facilitate confident reporting and analysis on the extent and characteristics of the homelessness including the following:

- ❖ Unduplicated counts of clients served within the Charlotte-Mecklenburg CoC
- ❖ Patterns of use of persons entering and exiting the homeless assistance system
- ❖ Evaluation of the effectiveness of homeless systems

Data Completeness Standard

All projects participating in HMIS are required to comply with the data standards. Data

entered needs to be valid and accurately represent information on the clients being served.

All data entered into the HMIS must be complete. Missing or incomplete data (e.g., missing digit(s) in a Social Security Number (SSN), missing the year of birth, missing information on disability or veteran status) can negatively affect the ability to provide comprehensive care to clients. Missing data could prevent the client from receiving needed services - services that could help them become permanently housed and end their episode of homelessness.

Universal Data Elements (UDE)

The purpose of the UDEs is to ensure that all service providers participating in the Charlotte-Mecklenburg HMIS are documenting the data elements necessary to produce Continuum-wide unduplicated count of clients served. This provides accurate counts for various reporting requirements, including the Annual Performance Report (APR) and the Longitudinal System Analysis (LSA) collected by the U.S. Department of Housing and Urban Development (HUD), plus other reporting requirements. This also ensures that the CoC has sufficient client data to conduct basic analysis on the extent and characteristics of the populations they serve.

Providers enter UDEs as part of the Entry Assessment. This assessment is available to users following their submission of the client's Entry information that includes which Household Members are participating in the program, the Entry Type, and the Entry Date.

Similarly, Providers enter specific Data Elements as a part of the Exit Assessment once the clients have completed and/or left the program. This assessment becomes available to users once they have indicated the household members who are leaving the program, the reason for leaving, the destination, and the Exit Date. The Exit Assessment should be completed on the final day in which the client receives a service or remain sheltered or housed within a program. Clients with an "unknown" reason for leaving often do not

return to the program as expected. These clients should have their Exit information recording as close to their last date of participation in the program as possible and should include information collected on or relevant to the date of the Exit Assessment.

Our community is evaluated regularly by HUD on its collection of UDEs. As such, all clients who receive services and have their information entered into HMIS should have complete data for all UDEs. The percentage of all clients served with "null/missing" UDEs or without full and valid responses in the Charlotte-Mecklenburg CoC HMIS should be no higher than the percentages outlined in the table below.

Program Specific Data Elements (PDEs)

As outlined in the HUD Data standards, which Program Specific Data Elements are required is dictated by the reporting requirements set forth by each Federal partner for each of their projects. For the purposes of consistency, elements in the Entry Assessment are required for all projects participating in HMIS in Charlotte-Mecklenburg. This is to ensure all service providers participating in the Charlotte-Mecklenburg HMIS are documenting the data elements necessary to produce the Annual Performance Report, the HUD CoC System Performance Measures, and to ensure the CoC has sufficient client data to conduct analysis on the extent and characteristics of the populations they serve.

The percentage of required data elements identified as 'missing' or 'client doesn't know/client refused' should be no more than 0% to 10% (unless otherwise specified), depending on project type and data element. (See Table below for details.) The Charlotte-Mecklenburg CoC has established an acceptable range of 'missing' and 'client doesn't know/client refused' responses, depending on the data element and the type of project entering data. The percentages listed in the last two columns represent the maximum percentages allowed.

Providers must meet HMIS data quality standards for each HUD Data Element.			
Data Quality: Personally Identifiable Information (6a)	**Client Doesn't Know/ Client Refused**	**Missing**	**Overall**
Name (3.1) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
SSN (3.2) (% of Error Rate) [All Projects Except ES]	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
SSN (3.2) (% of Error Rate) [ES Projects Only]	Less than or Equal to 15%	Less than or Equal to 10%	Less than or Equal to 15%
Date of Birth (3.3) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Race (3.4) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Ethnicity (3.5) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Gender (3.6) (% of Error Rate)	Less than or Equal to 5%	Less than or Equal to 2%	Less than or Equal to 5%
Overall Score (% of Error Rate)			Less than or Equal to 5%
Data Quality: Universal Data Elements (6b)			
Veteran Status (3.7) (% of Error Rate)			Less than or Equal to 1%
Project Start Date (3.10) (% of Error Rate)			Less than or Equal to 1%
Relationship to Head of Household (3.15) (% of Error Rate)			Less than or Equal to 5%

Providers must meet HMIS data quality standards for each HUD Data Element.			
Client Location (3.16) (% of Error Rate)			Less than or Equal to 1%
Disabling Condition (3.8) (% of Error Rate)			Less than or Equal to 5%
Data Quality: Income and Housing Data Quality (6c)			
Destination (3.12) (% of Error Rate) [All Projects Except ES]			Less than or Equal to 5%
Destination (3.12) (% of Error Rate) [ES/ CE Projects Only]			Less than or Equal to 35%
Income and Sources at Start (4.2) (% of Error Rate)			Less than or Equal to 10%
Income and Sources at Annual Assessment (4.2) (% of Error Rate)			Less than or Equal to 10%
Income and Sources at Exit (4.2) (% of Error Rate)			Less than or Equal to 10%
Data Quality: Chronic Homelessness (6d)			
% of records unable to calculate			Less than or Equal to 5%
Data Quality: Timeliness (6e)			
Number of records at entry >= 7 days			Less than or Equal to 5%
Number of records at exit >= 7 days			Less than or Equal to 10%

*Users can find their Data Quality Measurements for Completeness in the CoC APR Report.

Data Accuracy and Consistency

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

Staff entering information into the HMIS database must enter information as stated by the client. Every project 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.

Data Accuracy

Information entered into the HMIS needs to be valid, i.e., it needs to accurately represent information on the people that enter any of the homeless service programs contributing data to HMIS. Inaccurate data may be intentional or unintentional. In general, false or inaccurate information is worse than incomplete information, since with the latter, it is at least possible to acknowledge the gap. Thus, it should be emphasized to clients and staff that it is better to enter nothing than to enter inaccurate information. To ensure the most up-to-date and complete data, data correction should be performed once the error(s) is detected.

Consistency

To ensure that data collected and entered into HMIS are consistent across all projects:

A. Every HMIS user will have to complete a new user training on the system,

policies, procedures, and protocols prior to receiving access to the system. Current users are required to take an annual recertification course.

B. A standardized intake assessment as specified by the HMIS Lead must be used by all providers to collect data in a consistent manner.

C. New agencies that join the CoC are required to review and understand all policies and procedures including data quality requirements.

D. Providers will make every effort to record accurate data.

Data Plan Monitoring

The Charlotte-Mecklenburg Continuum of Care (CoC) recognizes that data from HMIS are critical to meet the reporting and compliance requirements of individual agencies and the CoC as a whole.

To ensure that all projects are in compliance with the requirements and expectations outlined in this plan, the Data Advisory Committee will monitor the process on a quarterly basis to identify and resolve any issues that affect the timeliness, completeness and the accuracy of data entry. The results will also be shared with the HMIS Sub-committee and CoC Governing Board on a quarterly basis. All monitoring will be done in accordance with the Data Quality Monitoring Plan.

Data Quality Monitoring Plan

The Data Quality Monitoring Plan entails a set of procedures that outlines a regular, ongoing process for analyzing and reporting on the reliability and validity of the data entered into the HMIS at both the project and aggregate system levels. This plan serves as the primary tool for tracking and improving data quality for the Charlotte-Mecklenburg Continuum of Care.

The following sections are covered under this monitoring plan:

A. Roles and Responsibilities
B. HMIS Lead Timelines
C. Timelines for Data Quality reports
D. Compliance and Monitoring frequency
E. Data Quality Reports and Outcomes

Roles and Responsibilities

Data Advisory Committee

The Data Advisory Committee—is responsible reviewing community level data before it is submitted to HUD (including Point in Time count, System Performance Measures, etc.), reviewing and approving or denying external research requests, recommending fees (if any) for data pulls, Continuous Quality Improvement work based on local data, recommending performance targets to the CoC Board, monitoring program and system performance and reporting results to the Board, developing and recommending privacy, security and data quality plans for presentation to and approval by the Board, providing guidance and feedback regarding HMIS, annually evaluating the HMIS Lead and reporting the results of that evaluation to the Board, and performing other related duties, in partnership with the Collaborative Applicant, the HMIS Lead and the local HMIS System Administrator. They will review data quality reports, work with the HMIS Lead to identify steps necessary to correct data/data collection levels and to identify training needs, review the benchmark and goals spreadsheets, and report progress to the HMIS Committee and CoC Governing Board.

Contributing HMIS Organizations

Providers are responsible for entering and correcting client data. It is the Agency Administrator (AA)'s role to oversee the process. It is recommended that each project run data quality reports monthly to meet the required HUD benchmarks. The CEO/Executive Director is ultimately responsible for all activity associated with agency staff access to and use of HMIS.

HMIS Lead Timelines

It is the responsibility of the HMIS Lead to submit two important reports on behalf of the Charlotte-Mecklenburg Continuum of Care (CoC)

A. Longitudinal System Analysis (LSA): The LSA contains the data used to write the Annual Homeless Assessment Report. LSA data can also be used to support other purposes. The period for the LSA begins on October 1 and ends on September 30 of the following year.

B. CoC Annual Performance Report (APR): The HMIS Lead is to submit a CoC APR annually at the end of the HUD grant period. The HUD grant each year begins on April 1 and ends on March 31 of the following year

All data quality reports will follow the above HUD reporting timelines to achieve compliance, completeness, and accuracy of data for submission.

Timelines for Data Quality Reports

While it is highly recommended that every Contributing Homeless Organizations (CHOs) run the APR report for each project on a monthly basis, each of the projects are required to be in compliance and submit their project level APR reports for the quarter to the HMIS Lead on a quarterly basis. The data quality process will be administered four times annually, during the months of January, April, July, and October. All reports are due by the 15th of the month and should be submitted via email to the HMIS Help Desk email: HMIS@MeckNC.gov

Compliance and Monitoring Frequency

It is the responsibility of the Agency's CEO and/or Executive Director along with the staff to ensure compliance with all data quality requirements. The Agency's CEO and/or

Executive Director and Agency Administrators will receive confirmation of submission and will be notified if their program does not meet any or all the requirements. HMIS Staff will be available to provide support to improve project data quality. The Committee and the staff understand that imposing multiple changes and expecting providers to comply with the changes can be challenging.

For all HUD-funded projects, lack of compliance with data quality requirements may result in forfeiting points in the annual local NOFA Evaluation Scorecard. Similar negative impact may occur on NCDHHS ESG grant rating and ranking which requires the use of HMIS reporting. If, for unforeseen reasons, data issues arise during important reporting periods (such as AHAR, CoC Competition etc.), it will be the agency's responsibility to determine an alternative plan to ensure data are entered and corrected in the system to meet reporting deadlines and be in compliance.

Data Quality Reports and Outcomes

HUD requires as a part of the data quality plan that a set of standard reports be created. For the Charlotte-Mecklenburg CoC, there will be standard reports for all Program Types and some Program Type specific reports. Report details along with submission criteria and deadlines will be communicated every quarter by the Lead to the AA. All reports will comply with the HUD Data Standards and their requirements.

Appendix A: Universal and Program-Specific Data Elements

Exhibit 1: Universal Data Element Collection Summary

Data Element	Data Collected For				When the Data Is Collected					
	All Clients	HoH Only	HoH and Other Adults	Adult Clients Only	Record Creation	Project Start	At Occurrence	At Update	Annual Assessment	At Exit
3.1 Name	X				X					
3.2 Social Security Number	X				X					
3.3 Date of Birth	X				X					
3.4 Race	X				X					
3.5 Ethnicity	X				X					
3.6 Gender	X				X					
3.7 Veteran Status				X	X					
3.8 Disabling Condition	X					X		X	X	
3.10 Project Start Date	X					X				
3.11 Project Exit Date	X									X
3.12 Destination	X									X
3.15 Relationship to Head of Household	X					X				
3.16 Client Location		X				X	X (at time the client's location changes from one CoC to another, if applicable)			
3.20 Housing Move-in Date			**X**				X (at time of move-in to PH, if applicable)			

3.917 Living Situation			X		X	X		X	X	

Further information regarding the universal data elements can be found in the Further information regarding the universal data elements can be found in the [2022 HMIS Data Standards](#) [Manual - Version 1.0, May 2021](#)

Exhibit 2 HHS: PATH Program Specific Element Visibility – Collection Requirements

All PATH projects are required to collect all the Universal Data Elements and the relevant Program Specific Data Elements. These elements should be collected for every member of the household.

The Program-Specific Data Elements to be collected by each PATH project are as shown below:

     X = data collection required

     Δ = data collection is not required but encouraged

Data Element	Street Outreach	Services Only
4.2 Income and Sources	X	X
4.3 Non-Cash Benefits	X	X
4.4 Health Insurance	X	X
4.5 Physical Disability	X	X
4.6 Developmental Disability	X	X
4.7 Chronic Health Condition	X	X
4.8 HIV/AIDS	Δ	Δ
4.9 Mental Health Problem	X	X
4.10 Substance Abuse	X	X
4.12 Contact	X	X
4.13 Date of Engagement	X	X
P1 Service Provided - PATH	X	X
P2 Referrals Provided - PATH	X	X
P3 PATH Status	X	X
P4 Connection with SOAR	X	X

Further information regarding the PATH program specific data elements can be found on page 11 of the [PATH Program HMIS Manual](#)

Exhibit 3 HHS: RHY Program Specific Element Visibility – Collection Requirements

Within HMIS, different funding sources and projects require collection of different program specific information. The Program Specific Data Elements are elements that are designed and managed by at least one of the HMIS federal partner programs. Some of program specific data elements are collected across most federal partner programs; these are called "Common" Program Specific Data Elements. The Common Elements used by RHY-funded projects are elements 4.2-4.13. These elements should be collected for every member of the household.

The table below shows all program specific elements in which at least one RHY program component is required to collect information.

X = data collection required

Data Element	BCP-es	BCP-p	MGH	SOP	TLP	DEMO
4.2 Income and Sources			X		X	X
4.3 Non-Cash Benefits	X	X	X		X	X
4.4 Health Insurance	X	X	X	X	X	X
4.5 Physical Disability	X	X	X	X	X	X
4.6 Developmental Disability	X	X	X	X	X	X
4.7 Chronic Health Condition	X	X	X	X	X	X
4.9 Mental Health Problem	X	X	X	X	X	X
4.10 Substance Abuse	X	X	X	X	X	X
4.12 Contact				X		
4.13 Date of Engagement				X		
R1 Referral Source	X	X	X		X	X
R2 RHY: BCP Status	X	X				
R3 Sexual Orientation	X	X	X	X	X	X
R4 Last Grade Completed	X	X	X		X	X
R5 School Status	X	X	X		X	X
R6 Employment Status	X	X	X		X	X
R7 General Health Status	X	X	X		X	X
R8 Dental Health Status	X	X	X		X	X
R9 Mental Health Status	X	X	X		X	X
R10 Pregnancy Status	X	X	X	X	X	X
R11 Formerly a Ward of Child Welfare/Foster Care Agency	X	X	X		X	X
R12 Formerly a Ward of Juvenile Justice System	X	X	X		X	X

Data Element	BCP-es	BCP-p	MGH	SOP	TLP	DEMO
R13 Family Critical Issues	X	X	X		X	X
R14 RHY Service Connections	X	X	X		X	X
R15 Commercial Sexual Exploitation/Sex Trafficking	X	X	X	X	X	X
R16 Labor Trafficking	X	X	X	X	X	X
R17 Project Completion Status	X		X		X	X
R18 Counseling	X	X	X		X	X
R19 Safe and Appropriate Exit	X		X		X	X
R20 Aftercare	X	X	X		X	X

Further information regarding the RHY program specific data elements can be found on page 21 of the RHY Program HMIS Manual.

Exhibit 4 HUD: CoC Program Specific Element Visibility – Collection Requirements

Common data elements are collected by most projects funded by a federal partner. CoC funded projects must collect most of the common data elements and are necessary to generate the Annual Performance Report. These elements should be collected for every member of the household.

The following chart indicates which elements are required for each of the CoC components:

X = data collection is required

CES = data collection is determined by how the CoC has structured the coordinated entry system in their area. Placement of the element would be required for any project that is conducting an assessment for the coordinated entry system. This may be across multiple projects or sited in a central access point or coordinated intake center.

Data Element	Homelessness	Permanent	Rapid	Supportive Services	Transitional
4.2 Income and Sources	x	x	x	x	x
4.3 Non-Cash Benefits	x	x	x	x	x
4.4 Health Insurance	x	x	x	x	x
4.5 Physical Disability	x	x	x	x	x
4.6 Developmental Disability	x	x	x	x	x
4.7 Chronic Health Condition	x	x	x	x	x
4.8 HIV/AIDS	x	x	x	x	x
4.9 Mental Health Problem	x	x	x	x	x
4.10 Substance Abuse	x	x	x	x	x
4.11 Domestic Violence	x	x	x	x	x
4.12 Contact				Only for SSO-Street Outreach	
4.13 Date of Engagement				Only for SSO-Street Outreach	
4.18 Housing Assessment Disposition	CES	CES	CES	CES	CES
W5 Housing Assessment at Exit	x				

Further information regarding the CoC program specific data elements can be found in the CoC HMIS Program Manual.

Exhibit 5 HUD: ESG Program Specific Element Visibility – Collection Requirements

Common elements are data collected by most projects funded by one of the federal partners. The following chart indicates which elements are required for collection for each of the ESG component types. These elements should be collected for every member of the household.

ESG projects must collect data according to the chart below to generate the CSV-CAPER Report.

X = data collection is required

CES = data collection is determined by how the CoC has structured the coordinated entry system in their area. Placement of the element would be required for any project that is conducting an assessment for the coordinated entry system. This may be across multiple projects or sited in a central access point or coordinated intake center.

Data Element	ES Entry/Exit	ES Night by Night	Homelessness Prevention	RRH	Street Outreach
4.2 Income and Sources	X		X	X	X
4.3 Non-Cash Benefits	X		X	X	X
4.4 Health Insurance	X		X	X	X
4.5 Physical Disability	X	X	X	X	X
4.6 Developmental Disability	X	X	X	X	X
4.7 Chronic Health Condition	X	X	X	X	X
4.8 HIV/AIDS	X	X	X	X	X
4.9 Mental Health Problem	X	X	X	X	X
4.10 Substance Abuse	X	X	X	X	X
4.11 Domestic Violence	X	X	X	X	X
4.12 Contact		X			X
4.13 Date of Engagement		X			X
4.14 Bed Night		X			
4.18 Housing Assessment Disposition	CES	CES	CES	CES	CES
W5 Housing Assessment at Exit			X		

Further information regarding the ESG program specific data elements can be found in the ESG Program HMIS Manual.

Exhibit 4-5 VA Program Specific Element Visibility – Collection Requirements

All VA-funded projects participating in HMIS are required to collect and enter Universal Data Elements and relevant Program-Specific Data Elements. These elements should be collected for every member of the household. The Program Specific Data Elements to be collected by each VA- funded project are shown below:

> X = data collection is required
>
> O = Data collection optional at the discretion of grantee

Data Element	SSVF: RRH	SSVF: HP	HCHV: CRS EH/SH	GPD: All
3.1-3.917 Universal Data Elements	X	X	X	X
4.2 Income and Sources	X	X	X	X
4.3 Non-Cash Benefits	X	X	X	X
4.4 Health Insurance	X	X	X	X
4.5 Physical Disability			X	X
4.6 Developmental Disability			X	X
4.7 Chronic Health Condition			X	X
4.8 HIV/AIDS			X	X
4.9 Mental Health Problem			X	X
4.10 Substance Abuse			X	X
4.11 Domestic Violence			X	X
V1 Veteran's Information	X	X	X	X
V2 Services Provided – SSVF	X	X	O	O
V3 Financial Assistance – SSVF	X	X		
V4 Percent of AMI (SSVF Eligibility)	X	X		
V5 Last Permanent Address	X	X		
V6 VMAC Station Number	X	X		
V7 SSVF HP Targeting Criteria		X		
P4 Connection with SOAR	X	X		
R4 Last Grade Completed	X	X		
R6 Employment Status	X	X		

Further information regarding the VA program specific data elements can be found in the VA Program HMIS Manual

Appendix B: Terms and Definitions

By-Name List, also known as the One List – A real-time catalog of the names of existing clients enrolled in Coordinated Entry, Emergency Shelter, Safe Haven, Street Outreach, Transitional Housing, or Permanent Housing programs (without a housing move-in date), the By-Name List is an important tool for coordinated entry as it supplements other tools used to track homelessness (such as the Point-in-Time count), aids in assessing existing clients' needs, and helps in tracking individuals' entry into and exit out of the homeless services system.

Coordinated Entry System – Charlotte-Mecklenburg's Coordinated Entry System serves as a front door to connect people facing or experiencing homelessness to housing and supports in an accessible, equitable, transparent manner. This allows all partners in the Charlotte-Mecklenburg Continuum of Care to collaborate to improve access and outcomes for people without permanent housing while delivering equitable, trauma informed services.

Data Quality Benchmarks – Quantitative measures used to assess the validity and reliability of the data. These include measures for timeliness, completeness, and accuracy.

Data Quality Monitoring Plan – 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. A data quality monitoring plan is the primary tool for tracking and generating information necessary to identify areas for data quality improvement.

Data Quality Plan – A community-level document that facilitates the ability of a CoC to achieve statistically valid and reliable data. A data quality plan is generally developed by the HMIS Lead Agency with input from community stakeholders and is formally adopted by the CoC. At a minimum, the plan should:

- Identify the responsibilities of all parties within the CoC that affect data quality.
- Establish specific data quality benchmarks for timeliness, completeness, and accuracy.
- Describe the procedures that the HMIS Lead Agency will take to implement the plan and monitor progress to meet data quality benchmarks.
- Establish a timeframe for implementing the plan to monitor the quality of data on a regular basis.

Data Quality Standards – A national framework for ensuring that every Continuum of Care can achieve good quality HMIS data. It is anticipated that HUD will propose Data Quality Standards that 1) establishes administrative requirements and, 2) sets baseline data quality benchmarks for timeliness, completeness, and accuracy.

Homeless Management Information Systems (HMIS) – 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 administered data system used to

record and analyze client, service and housing data for individuals and families who are homeless or at risk of homelessness.

HMIS Data Quality – Refers to the reliability and validity of client-level data. HMIS data quality can be measured by the extent to which the client data in the system reflects actual information in the real world.

HMIS Reports

- **Annual Homeless Assessment Report (AHAR)** – HUD's annual report to Congress on the nature and extent of homelessness nationwide.
- **Annual Performance Report (APR)** – A reporting tool that HUD uses to track program progress and accomplishments of HUD homeless assistance and HPRP Programs on an annual basis. Formerly known as the Annual Progress Report.
- **Longitudinal System Analysis (LSA)** - Contains the data used to write the AHAR. LSA data can also be used to support other purposes.

Program Specific Data Elements (PDEs) – Program Specific Data Elements differ from the Universal Data Elements in that no one project must collect every single element in this section. Which data elements are required is dictated by the reporting requirements set forth by each Federal partner for each of their programs. A Partner may require all the fields or response categories in a data element or may specify which of the fields or response categories are required for their report.

Project Descriptor Data Elements (PDDE) – Project Descriptor Data Elements (PDDE) are completed within the HMIS for each project that is able to enter data into the HMIS. The PDDEs include information used to identify each organization using the HMIS and all the projects associated with an organization.

Universal Data Elements (UDEs) – HMIS Universal Data Elements are elements required to be collected by all projects participating in HMIS, regardless of funding source. UDE's establish the baseline data collection requirements for all contributing CoC projects. They are the basis for producing unduplicated estimates of the number of persons experiencing homelessness, accessing services from homeless assistance projects, basic demographic characteristics of persons experiencing homeless, and patterns of service use, including information on shelter stays and homelessness over time.

Appendix C: Acronyms

Acronyms	
AHAR – Annual Homeless Assessment Report	HIC – Housing Inventory Count
AIRS – Alliance of Information and Referral Systems	HIPAA - Health Insurance Portability and Accountability Act of 1996
APR – Annual Performance Report	HP – Homelessness Prevention
AA – Agency Administrator	HUD – Housing and Urban Development
CAPER – Consolidated Annual Performance and Evaluation Report	LSA – Longitudinal System Analysis
BFZ – Built for Zero Initiative to End Homelessness for all populations	NOFA – Notice of Funding Availability
CDBG – Community Development Block Grant	PIT – Point in Time Count
CoC - Continuum of Care	PATH - Projects for Assistance in Transition from Homelessness
CES – Coordinated Entry System	PDDE – Project Descriptor Data Element
CH – Chronically Homeless	PDE – Program Specific Data Element
CoC – Continuum of Care	PPI – Personal Protected Information
CRS – Contract Residential Services	PSH – Permanent Supportive Housing
DAC – Data Advisory Committee	RHY – Runaway and Homeless Youth
DEMO – Demonstration Grants	ROI – Release of Information
DOB – Date of Birth	RRH – Rapid Re-Housing
DV – Domestic Violence	SH – Safe Haven
ES – Emergency Shelter	SHP – Supportive Housing Program
ESG – Emergency Solutions Grant	SOP – Street Outreach Program
DV – Domestic Violence	SRO – Single Room Occupancy
ES – Emergency Shelter	SSI – Supplemental Security Income
ESG – Emergency Solutions Grant	SSN – Social Security Number
GPD – Grant and Per Diem	SSO – Supportive Services Only
HCHV – Healthcare for homeless Veterans	SSVF – Supportive Services for Veteran Families

Acronyms	
HMIS – Homeless Management Information System	TANF – Temporary Assistance for Needy Families
HoH – Head of Household	UDE – Universal Data Element
HEARTH - Homeless Emergency Assistance and Rapid Transition to Housing	