HMIS Data Quality Plan

Approved by HMIS DQ Sub-Committee on 9/25/25

Table of Contents

10/30/2025

10/30/2025

Key Terms & Acronyms

Key Term	Acronym (if used)	Brief Definition
Advanced Reporting Tool	ART / Business Objects	This is accessed through HMIS and also referred to as 'Business Objects' &/or 'SAP' The HMIS Lead assigns ART licenses as necessary
Coordinated Entry / Coordinated Entry System	CE / CES	Prioritizes limited housing resources by connecting people experiencing homelessness with the most appropriate housing program available based on their needs and encourages collaboration between homeless service providers to reduce duplication of efforts. Each LHC in the MD BoS CoC has an LHC specific CE project in HMIS
Community Services		The HMIS that the CoC uses (previously called ServicePoint)
Comparable Database		Used by Partner Agencies that meet the HEARTH Act definition of Victim Service Provider (VSP) &/or have projects that receive specific DV funding. A relational database that meets all HMIS Data Standards and the minimum standards of HMIS privacy and security requirements, including HUD's most recent reporting standards and comma separated value (CSV) format specifications.
Continuum of Care	CoC	A regional or local planning body that coordinates housing and services funding for homeless families and individuals
CoC Lead		Is responsible for applying for CoC Planning funds, Coordinating and submitting the annual application to HUD for CoC program funding, and Coordinating and administering the activities and responsibilities of the CoC as specified in the CoC's Governance Charter. Maryland Department of Housing and Community Development (DHCD) is the entity elected by the CoC for this role
Covered Homeless Organization	CHO	Any organization (including its employees, volunteers, affiliates, contractors, and associates) that records, uses or processes data on homeless clients for an HMIS
Emergency Shelter	ES	Any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless
End User		An individual who is a paid staff member, contract employee, or official volunteer of a Partner Agency, that has access to HMIS
HMIS Helpdesk	Helpdesk	An online system for HMIS End User's and CoC Stakeholders to submit a ticket requesting support from the MD BoS HMIS Lead Team by CLICKING HERE
Housing Inventory Count	HIC	**HUD Exchange: PIT and HIC**
Housing Move-in Date	HMID	HMID = Date client physically moves into housing • Cannot be prior to a Project Start Date • Might be different than date lease is signed

Homeless Management Information System	**HMIS**	An internet-based database that is used by Partner Agencies to record and store client- level information to better understand the numbers, characteristics and needs of homeless persons and those at risk of homelessness
HMIS Lead		The HMIS Lead Agency is responsible for the technical design, implementation, and operation of the HMIS. In doing so, the HMIS Lead provides Partner Agencies and users with training and technical support, and ensures compliance with HMIS policies and procedures. Maryland Department of Housing and Community Development (DHCD) is the entity elected by the CoC for this role.
HMIS Participating Project		Projects that are either required by a funder to, or the Partner Agency has opted to, enter client level data into the CoC's HMIS
HMIS System Administrator		Are part of the HMIS Lead Team and manage the day-to-day operations of the MD BoS HMIS, including the HMIS Helpdesk. The Institute for Community Alliances (ICA) is the entity selected by the CoC for this role.
Head of Household	**HoH**	The HoH is the 'primary' client of the household (HH). This is client that makes the client eligible for services. For example, if the project only serves veterans – the HoH would be the client that is the veteran.
Maryland State HMIS Data Warehouse	**MSHDW**	The MSHDW is a collaborative effort between the Maryland Department of Housing and Community Development and the sixteen Maryland Continuums of Care (CoC). The software used by MSHDW is Community Services, a web-based HMIS client tracking database created and maintained by WellSky. MSHDW operates a separate Community Services HMIS that is a separate system from the MD BoS HMIS
Non-HMIS Participating Project		Projects that does not enter client level data into the CoC's HMIS but are required to provide aggregate client level data to the CoC for reporting purposes. (Example: HUD-VASH, VSP's using a Comparable Database, etc.)
Local Homeless Coalition	**LHC**	A group made up of members from different sectors of a community that come together to plan, deliver, and evaluate homeless services, housing, and supportive services in a defined geographic area
Other Permanent Housing	**OPH**	HUD Project Type: Long-term housing that is not otherwise considered permanent supportive housing or rapid re-housing
Partner Agency		Agencies that are members of the MD BoS CoC **and** serve persons experiencing homelessness, or near homelessness (as defined by HUD) in the geographic area of MD-514, **and** have a current 'Partner Agency Agreement' with the HMIS Lead to use the MD BoS HMIS. Partner Agencies can have '*HMIS Participating Projects*' &/or '*Non-HMIS Participating Projects*' in the MD BoC HMIS
Partner Agency HMIS Point-of-Contact	**HMIS PoC / PoC**	This person(s) is the primary contact between the Partner Agency and the HMIS Lead. They are responsible for ensuring that the Partner Agency adheres to all MD BoS HMIS policies and related procedures.

Personally Identifiable Information	PII	Any information maintained by or for a Partner Agency about a client that: 1) Identifies, either directly or indirectly, a specific individual; 2) can be manipulated by a reasonably foreseeable method to identify a specific individual; or 3) can be linked with other available information to identify a specific individual
Point-in-Time	PIT	**HUD Exchange: PIT and HIC**
Project Descriptor Data Elements	PDDE	The Project Descriptor Data Elements (PDDE), as defined by HUD, contain basic information about projects in HMIS and help ensure HMIS is a consistent and comprehensive database of information about homelessness. The PDDEs are the 'building blocks' of HMIS. PDDE's are the building blocks of an HMIS.
Project Specific Data Elements	PSDE	The Program Specific Data Elements (PSDE) have been designed by HUD to allow projects to meet data collection and reporting requirements per the HMIS Data Standards. HMIS is required to provide for the collection of these data elements and any changes to PSDEs that may change over time. PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence and provide additional information about the characteristics of clients, the services they are provided, and project outcomes
Rapid Re-Housing	RRH	HUD Project Type: permanent housing that provides short-term &/or medium-term tenant-based rental assistance and supportive services to households experiencing homelessness.
Permanent Supportive Housing	PSH	HUD Project Type: permanent housing that provides housing assistance (e.g., long-term leasing or rental assistance) and supportive services to assist households with at least one member (adult or child) with a disability in achieving housing stability.
System Performance Measures	SPM	**HUD Exchange: System Performance Measures (SPM)**
Transitional Housing	TH	HUD Project Type: Temporary housing with supportive services to individuals and families experiencing homelessness with the goal of interim stability and support to successfully move to and maintain permanent housing.
Universal Data Elements	UDE	The Universal Data Elements (UDEs), as defined by HUD, establish the minimum data collection requirements for all homeless, and near-homeless, housing and/or service projects entering data into HMIS, *regardlessof funding source*. The Universal Data Elements collect information on the basic demographics of the population being served, including personally identifying information (PII), and therefore are critical to an HMIS's ability to produce the HUD required unduplicated estimates of the number of people at-risk of or currently experiencing homelessness. Additionally, these elements provide information about access and use of homeless assistance projects, including patterns of service use, information on shelter stays, and episodes of homelessness over time

Victim Service Provider	**VSP**	A Partner Agencies that is defined as a *Victim Service Provider* (VSP) by the HEARTH Act.
		Partner Agencies that meet this criteria are required to use a Comparable Database.
		If the Partner Agency as a whole is not a VSP – ***but*** has projects that receive federal, state, or county funds specific to DV (for example funding from FVPSA, OVC, OVW, or Specialized Housing and Services for Victims of Human Trafficking), those specific projects must also use a Comparable Database.

10/30/2025

SECTION 1: INTRODUCTION

Purpose

This document describes the Homeless Management Information System (HMIS) data quality plan for the Maryland Balance of State CoC and meets requirements set forth by the Department of Housing and Urban Development (HUD). By using HUD resources as guidance, the HMIS Data Quality Sub-Committee developed the CoC's HMIS Data Quality Plan. The HMIS Data Quality Sub-Committee will review, and if needed, update this document annually, considering the latest HMIS data standards and locally developed policies and procedures.

> **NOTE:** All projects in HMIS, **regardless of funding**, must adhere to the benchmarks & requirements outlined in the MD BoS HMIS Data Quality Plan

HUD Data & Technical Standards

An HMIS is a locally administered, electronic data collection system that stores longitudinal person-level information about the households who access homeless and other human services in a community. Each CoC receiving HUD funding is required to implement an HMIS to capture standardized data about all persons accessing the homeless assistance system. Furthermore, elements of HUD's annual CoC funding competition are directly related to a CoC's progress in implementing its HMIS. In 2004, HUD published HMIS Data and Technical Standards in the Federal Register. The Standards define the requirements for data collection, privacy safeguards, and security controls for all local HMIS. HMIS Data Standards are typically revised by HUD at least every 2 years to incorporate new privacy and technology industry standards. More information on HMIS Data Standards can be found here on the HUD Exchange - https://www.hudexchange.info/programs/hmis/hmis-data-standards/.

What Is Data Quality and Why Does It Matter?

Data quality is the extent to which the information contained in HMIS (or Comparable Database) *accurately represents* the real-world clients and situations it is meant to describe.

High-quality data is integral to all work towards ending homelessness because it:

- Provides a clearer understanding of homelessness within the CoCs geographic area, which:
  - Allows for data-informed decisions at both the project- and system- levels;
  - Enables a CoC, and projects within a CoC, to tell the story of homelessness as realistically and completely as possible for use in advocacy and community education;
- Provides HMIS End Users with immediate access to important client information that can streamline daily activities and may result in improved service delivery and prompt referrals for clients;
- May directly affect clients through the Coordinated Entry process, determining which services they may or may not appear to be eligible for;
- Results in more accurate and complete reports for funders and stakeholders, which can affect:
  - Meeting the requirements for CoC and other federal funding streams;
  - Funding opportunities Partner Agencies and the CoC apply for;
  - A Partner Agencies ability to obtain funding to provide needed services to individuals at risk of and/or experiencing homelessness and;
  - System-level performance as it relates to the HUD Notice of Funding Opportunity (NOFO)
    - The MD BoS CoC may use the reallocation process to ensure all renewing projects are cost-effective and in line with HUD's guidelines and recommendations to end homelessness. The

reallocation process allows the CoC to direct funding away from grantees that are underutilizing resources and allow those resources to be redirected to where they can be better used. Projects with *two consecutive years* of corrective planning status may be at risk of losing these funds per the recommendation of the CoC Board &/or CoC Funding Committee.

The quality of data is determined by assessing certain characteristics such as **Completeness**, **Timeliness**, **Accuracy**, and **Consistency**. To assess data quality, a community must first think about what data quality means and document this understanding in a data quality plan.

What Is an HMIS Data Quality Plan?

An HMIS Data Quality Plan is a system-wide document that supports a CoC to achieve statistically valid and reliable data in their local HMIS. The plan intends to accomplish the following:

- **Identify** the *responsibilities* of all parties within the CoC with respect to HMIS data quality;

- **Establish** *specific data quality standards* for timeliness, completeness, accuracy, and consistency;

- **Describe** the *procedures for implementing the plan and monitoring* progress toward meeting data quality standards, including:
  - Defining how improvement opportunities in data quality are addressed; and
  - Establishing timelines for monitoring data quality on a regular basis

How Is HMIS Data Quality Monitored?

Ongoing HMIS data quality monitoring will be conducted with the goal of ensuring Partner Agencies maintain a high level of data quality at all times with a minimal amount of data clean-up.

Data quality issues that are the result of problems with a data entry process will be noticed more quickly with regular monitoring, which means corrections to processes can be implemented earlier to minimize the amount of corrections that will be necessary.

Additionally, it can be easier to make corrections to more recent records where a client is still available and/or before a problem is compounded by information added at a later date.

The full monitoring plan is detailed in the '*Monitoring*' section of this document.

SECTION 2: MD BoS CoC DQP Overview

Purpose

The HMIS Data Quality Plan has been developed to provide actionable, measurable steps to address data quality within the MD BoS CoC Homeless Management Information System (HMIS), and data provided by Partner Agency Non-HMIS Participating projects using an HMIS Comparable Database.

What Is Included?

The HMIS Data Quality Plan begins by:

- Outlining Roles and Responsibilities

- Addressing the components of data quality:
  - Completeness
    - PDDE

- UDE
- PSDE
- Bed Utilization
- System Coverage
- Timeliness
- Accuracy
- Consistency

- Defining the data quality benchmark and requirements set forth by the CoC for each data component
- Finally, the '*Monitoring*' section of the DQP outlines how the quality for each data component will be monitored

Appendices to this plan include an *HMIS Monitoring Tool* for project monitoring, and an outline of a *Data Quality Improvement Plan* for use in situations where a Partner Agency's data quality consistently has room for improvement and the Partner Agency requires extra assistance to meet data quality standards.

Roles and Responsibilities

The HMIS Data Quality Plan sets expectations for all MD BoS HMIS stakeholders, including *Partner Agencies*, *End Users,* the *HMIS and CoC Lead*(s) to ensure valid and reliable data is captured on all persons accessing services in the MD BoS CoC homeless response system.

The HMIS Lead Team will work with all projects to ensure they have access to the tools they need to achieve high data quality. This includes training, opportunity for HMIS Partner Agencies to have representation on the HMIS Governance Committee and HMIS Sub-Committees, as well as incentives to maintain a high level of data quality and accountability for non-responsiveness to data quality concerns.

The *Partner Agency HMIS Point-of-Contact* (PoC) is responsible for ensuring that the Partner Agency responds to and acts upon data quality concerns appropriately to ensure that the overall data quality within HMIS (or Comparable Database) is acknowledged and improved in an ongoing, objective, and data-driven manner.

Participation Expectations for Partner Agencies

Homeless service projects that receive federal, state, or county funds are **required** to use HMIS (or Comparable Database) and must meet certain data quality expectations to ensure accurate reporting for those grants. However, as every project contributes to the overall picture of homelessness within the MD BoS CoC, **all projects** in HMIS will be expected to meet applicable benchmarks in the HMIS Data Quality Plan, **regardless of funding source**.

Partner Agencies can have projects in HMIS that are categorized as either an '*HMIS Participating*' project or a '*Non-HMIS Participating*' project.

- **HMIS Participating Project**: Are projects that are either required by a funder to, or the Partner Agency has opted to, enter client level data into the CoC's HMIS
  - *All benchmarks* in HMIS Data Quality Plan apply to those HMIS projects categorized as a '*HMIS Participating*'

- **Non-HMIS Participating Project**: Are projects that do not enter client level data into the CoC's HMIS but are required to provide aggregate client level data to the CoC for reporting purposes. (Example: HUD-VASH, VSP's using a Comparable Database, etc.)
  - **Not all benchmarks** will apply to HMIS projects categorized as a '*Non-HMIS Participating*'; in the *Monitoring* section of this document, each benchmark will indicate if it applies to a '*Non-HMIS Participating*' project

10/30/2025

All Partner Agencies with projects, and End Users entering data, in HMIS are required to sign the '*HMIS Partner Agency Participation Agreement*' and '*HMIS End User Participation Agreement*', respectively. These agreements require the Partner Agency &/or End User to read and understand the '*MD BoS HMIS Policies and Procedures*' and abide by the processes and standards provided within it, including data quality.

MD BoS HMIS End Users at each Partner Agency are required to comply with the <u>MD BoS HMIS Data Quality Plan</u> when **entering** data into HMIS client records; however clients may **deny consent to SHARE** this information with other Partner Agencies.

The MD BoS HMIS operates under '**Implied Consent**', meaning that persons applying for &/or receiving services from an MD BoS HMIS Partner Agency agrees to allow End Users to use &/or disclose information as described in the *HMIS Privacy Policy* (excluding VSP's, who must utilize a comparable database).

An ROI **is not** required to share client data, **except** in instances outside of what is outlined in the HMIS Privacy Policy. However, Clients do have the right to choose **not to share** their information by completing the '*MD BoS HMIS Client Data Sharing Opt-Out Form'* (see the *HMIS Privacy Policy* for details).

Per the HMIS Policies and Procedures Manual, each Partner Agency must select at least one person to act as the designated *Partner Agency HMIS Point-of-Contact* (PoC) who is responsible on a day-to-day basis for enforcing the data collection and privacy requirements in the HMIS Policies and Procedures Manual (see the full *MD BoS HMIS Policies & Procedures Manual* for details).

Partner Agencies are responsible for ensuring that End User data entry is being conducted in a **timely manner** and to ensure the **accuracy** of the data entered. Data may also be used to measure program efficacy, which influences funding opportunities during competitive funding processes such as the annual Continuum of Care application to HUD (NOFO), HSP &/or ESG applications.

The HMIS Data Quality Plan is a living, evolving tool that will change as the CoC and its HMIS data needs change. The HMIS Data Quality Sub-Committee is responsible for reviewing and approving this document annually. As changes are made, Partner Agencies *may be required* to sign an updated agreement.

Use of a Comparable Database by Victim Service Providers (VSP)

Partner Agencies that are defined as a *Victim Service Provider* (VSP) by the HEARTH Act must use a *Comparable Database*, rather than the MD BoS HMIS. **Or** if the Partner Agency as a whole is not a VSP – but has projects that receive federal, state, or county funds specific to DV (for example funding from FVPSA, OVC, OVW, or Specialized Housing and Services for Victims of Human Trafficking), those specific projects are required to use a comparable database. A comparable database is a relational database that meets all HMIS Data Standards and the minimum standards of HMIS privacy and security requirements, including HUD's most recent reporting standards and comma separated value (CSV) format specifications.

> **NOTE:** Partner Agencies serving survivors of domestic violence &/or sexual assault that **do not** meet this criteria **must use** the MD BoS HMIS

HUD resources for HMIS Data Standards and Comparable Databases:

- https://www.hudexchange.info/resource/5743/hmis-when-to-use-a-comparable-database/

- https://www.hudexchange.info/homelessness-assistance/domestic-violence/

10/30/2025

> **NOTE:** Partner Agencies using a ***Comparable Database*** *are required* to collect client-level data consistent with MD BoS HMIS data collection requirements

To comply with the *Monitoring* section of this document, Partner Agencies using a comparable database **must be able to produce unduplicated aggregate reports**, *including CSV's, in order to submit data about the individuals and families served with federal, state, or county funds to the HMIS Lead Team*. HUD funded providers must also have a mechanism to track the length of assistance provided. Therefore, a comparable database must collect client-level data over time and generate unduplicated aggregate reports based on that data. *It **cannot** be a database that only records aggregate information*.

The client-level data collection requirements for HUD projects are specified in the **HUD's HMIS Data Standards**.

Section 3: Data Quality Components, Requirements, & Benchmarks

Four Components of DQ

HUD identifies data quality as having four components: ***Completeness***, ***Timeliness***, ***Accuracy***, and ***Consistency***.

These components are defined below, and how they are monitored is described in the '*Monitoring*' section of this document.

Completeness	Timeliness	Accuracy	Consistency

• All agencies providing homeless or near-homeless services in the CoC are in HMIS
 	
• All clients entered into HMIS
 	
• All UDEs & PSDEs are entered
 	
• Complete Interim assessments (Updates / Annual) and Exit data is entered
 	
• All homeless dedicated beds in the CoC are recorded in HMIS
	• In a timely manner, data in HMIS is:
	   ○ Entered
	   ○ Updated - as new information becomes available
		• Clients enrolled in correct HMIS Project Type
		
		• HMIS data is an accurate reflection of information provided by client
			• Common interpretation of questions
			
			• Common interpretation of client answers
			
			• Common knowledge of what fields to answer

CoC Minimum Data Quality Standards

The data quality chart below shows the benchmarks, by project type, to be met by all Partner Agencies, **regardless of fund source**. When data quality benchmarks are met, reporting is more reliable and can be used to evaluate the extent of homelessness, service gaps, and project impact on the homeless service system.

10/30/2025

Data Quality Benchmarks - *Maximum* Error Rate Allowable by Project Type	CE	HP	ES (E/E Workflow)	ES (NBN Workflow)	PSH	RRH	St. O	SSO	TH
Completeness: UDE (Universal Data Elements – *including* HUD Verification sub-assessments) ***Street Outreach Projects**: Applies *AFTER* DoE has been recorded	5 %	5 %	5 %	5 %	2 %	2 %	*10 %	5 %	5 %
Completeness: PSDE (Project Specific Data Elements – *including* HUD Verification sub-assessments) ***Street Outreach Projects**: ▪ Applies to CLS (PSDE #4.12) from *Entry to Exit* ▪ Applies to *all other data elements* **AFTER** DoE has been recorded	5 %	5 %	5 %	5 %	2 %	2 %	*10 %	5 %	5 %
Completeness: PDDE (Project Descriptor Data Elements)	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %
Completeness: Bed/Unit Utilization & Inventory	N/A	N/A	85-105 %	85-105 %	85-105 %	85-105 %	N/A	N/A	85-105 %
Completeness: Homeless Response System Coverage	Individual projects are not monitored on this benchmark; rather the CoC as a whole is responsible to ensure that system coverage is as close to 100% as possible for all project types								
Timeliness	2 %	2 %	5 %	5 %	2 %	2 %	5 %	2 %	2 %
Accuracy	2 %	2 %	2 %	2 %	2 %	2 %	2 %	2 %	2 %
Consistency	2 %	2 %	2 %	2 %	2 %	2 %	2 %	2 %	2 %

Usage of 'Client Doesn't Know' – 'Client Prefers Not to Answer' – 'Data Not Collected'

All data elements in HMIS must be answered. Most required HMIS data elements provide for the options of "*Client doesn't know*" – "*Client prefers not to answer*" – "*Data Not Collected*" to be recorded. These options are *considered poor data quality* but are provided to allow a response to be recorded for required elements within an assessment when these situations do occur.

- **Data Not Collected** vs **Client Doesn't Know** vs **Client Prefers Not to Answer**
  - **Data Not Collected**: Should *only be used* if the End User **did NOT ask** (or attempt to ask) the question to a client
  - **Client Doesn't Know / Client Prefers Not to Answer**:
    - If the client has been asked the question & **THEY** say that they **do not know** / **do not want to provide an answer** – then these are the correct response
    - The "Client doesn't know" or "Client prefers not to answer" responses **should NOT be used** to indicate that the **END USER** does not know the client's response
    - **NOR** are these responses to be assumed without **FIRST** asking the client to provide the information

It is not the intention of HUD or the Federal Partners that clients be denied assistance if they refuse or are unable to supply the information. However, some information may be required by projects or public or private funders to determine eligibility for housing or services, or to assess needed services.

At a national level, in every project type, a majority of clients are willing to provide identifying information. If a project is experiencing a high rate of client refusals as compared to similar projects, the CoC will consider implementing trainings around interviewing or trust- building techniques to support client engagement. A deeper engagement with clients may lead to more rapid movement off the street and placement in housing, consistent with meeting federal goals to end homelessness and improvement on HUD's System Performance Measures.

Completeness

Completeness = Have all of the **required data elements** have been recorded in the clients HMIS record?

Definition & Importance

Data Completeness is the percentage of data fields for any given client, project enrollment, provider, or system that are filled in or answered. The definition used in the CoC Data Quality Brief is: "***The degree to which all required data is known and documented.***"

Completeness can be measured across three areas:

- **Client Records:** The completeness of a person's HMIS (or Comparable Database) record for a given project enrollment, as measured by completed response categories for Universal Data Elements (UDE) and Program-Specific Data Elements (PSDE)

- **Bed Utilization:** The completeness of HMIS (or Comparable Database) participation by bed inventory, measured by dividing the total number of beds recorded or set up within HMIS by the total number of homeless beds within the CoC's geographic coverage area.

  Both *HMIS Participating* & *Non-HMIS Participating* projects are required to have bed/unit inventory recorded in the CoC's HMIS for the following project types:

  - Emergency Shelter (E/E and NbN workflows)
  - Transitional Housing
  - PH - Permanent Supportive Housing
  - PH – Housing Only
  - PH - Housing with Services
  - PH – Rapid Re-Housing: Housing with or without Services

- **Homeless Response System (Partner Agency) Coverage:** the completeness of HMIS (or Comparable Database) participation by agencies in the CoC providing homeless and near-homeless services, regardless of funding, measured by dividing the number of HMIS participating agencies by the total number of agencies providing homeless and near-homeless services in the CoC's geographic area.

Incomplete or missing data always consists of ***null*** &/or "***data not collected***" values, and may include "*client doesn't know*" – "*client prefers not to answer*" – "*other*" values for some data elements.

Per the HMIS Policies and Procedures Manual, HMIS Participating projects ***may not*** create "*Anonymous*" records in HMIS. However, Clients do have the right to choose ***not to share*** their information by completing the '*MD BoS HMIS Client Data Sharing Opt-Out Form'* (see the HMIS Privacy Policy for details).

Complete data is critical to finding the right services for clients to end their homelessness experience. Incomplete data can negatively impact the CoCs' ability to make population-level assessments, analyze patterns in client information, identify changes within the homeless population, and adapt strategies appropriately. HMIS data quality is also part of funding applications, including CoC and ESG-funding, and low HMIS data quality scores may impact renewal funding or future funding requests.

While the CoC encourages all Partner Agencies to aim for 100% collection of all data elements, it also recognizes that 100% data completeness may not be realistic, or possible, in all cases.

The CoC has created benchmarks for project data completeness that are outlined below. *Ultimately, ownership of data quality is driven by the Partner Agencies. Meaning that once a client has been enrolled into a Partner Agencies HMIS project they are responsible for all data in the clients HMIS record from project entry to exit.*

All data elements, including those that had data previously entered into them by another Partner Agency (*Enrollment CoC, MD-514 County of Project Enrollment, Demographics, Prior Living Information, HMID, etc.*) *must be*:

- *Reviewed* with the client at project entry, *updated* &/or *corrected* as necessary
  - See charts in the Monitoring section under UDE and PSDE for list of data elements
- An '*Interim – Update*' assessment must be completed whenever a client provide new information, &/or circumstances change, during their project enrollment
- An '*Interim – Annual*' assessment must be completed for clients that continue to be enrolled in the project on the anniversary of project entry **even if there are no changes**

Completeness: PDDE (Project Descriptor Data Elements)

Definition & Importance

The Project Descriptor Data Elements (PDDE), as defined by HUD, contain basic information about projects in HMIS and help ensure HMIS is a consistent and comprehensive database of information about homelessness. The PDDEs are the 'building blocks' of HMIS.

PDDEs enable HMIS to:

- Associate client-level records with the various projects in which clients will enroll in across project types
- Associate client-level records with the various projects in which clients will enroll in across project types
- Clearly define the type of project the client is associated with the entire time they received housing or services
- Identify which federal partner programs are providing funding to the project; and
- Record bed and unit inventory and other information, by project, which is relevant for the Longitudinal SystemAnalysis (LSA), System Performance Measures (SPMs), Housing Inventory Counts (HIC), Point In Time (PIT) counts, and bed utilization reporting

HMIS PDDE Benchmark & Requirements

Applies to 'Non-HMIS Participating projects: Yes **those receiving federal, state, or county funds**

Applies to 'HMIS Participating projects: Yes
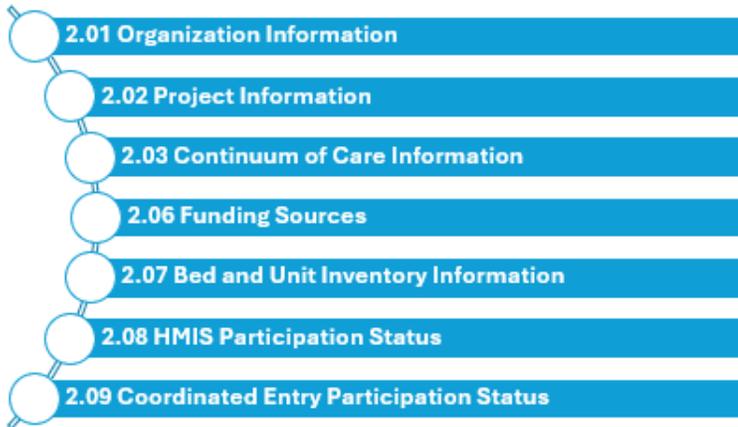
CoC benchmark for PDDEs applies to:

- **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

PDDEs are entered and managed by the HMIS Lead Team in collaboration with the Partner Agency HMIS PoC. PDDEs are *created at initial project setup* within HMIS, and updated as changes occur to project or funding, in addition to being *reviewed on an annual basis* with the HMIS Lead Team.

Per the HMIS Policies and Procedures Manual, the Partner Agency HMIS PoC is required to notify the HMIS Lead Team of any project and funding updates and changes (including changes to bed/unit inventory) within 5 business days of the change occurring.

You can find more information here on the HUD Exchange - https://www.hudexchange.info/programs/hmis/hmis-data-standards/standards/project-descriptor-data-elements/

The following are required PDDEs, with each comprised of multiple sub-elements of project information:

- 2.01 Organization Information
- 2.02 Project Information
- 2.03 Continuum of Care Information
- 2.06 Funding Sources
- 2.07 Bed and Unit Inventory Information
- 2.08 HMIS Participation Status
- 2.09 Coordinated Entry Participation Status

Completeness: Bed/Unit Utilization & Inventory

Completeness: Bed Utilization = To what degree are the **beds in HMIS occupied** by clients?

Definition & Importance

Bed & Unit utilization analysis is a good way to determine whether the data in HMIS is accurate for the clients served in the project at any given point and if there is a possible deficiency in exiting clients from the project in a timely manner (over- utilization) and/or entering clients into the project in a timely manner (under-utilization).

- Utilization is the number of beds that are filled by a client within a given period of time
- It is difficult to measure data quality if the utilization rate is too low or too high

HMIS Benchmarks & Requirements

Applies to 'Non-HMIS Participating projects: Yes *those receiving federal, state, or county funds*

Applies to 'HMIS Participating projects: Yes

CoC benchmark for Bed Utilization applies to:
- **ES**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'
- **RRH**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'
- **PSH**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'
- **TH**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

10/30/2025

Low utilization rates could indicate that the HMIS project was 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 HMIS project was over capacity, but it could also mean the project has not properly exited clients from the system.

Completeness: UDE (Universal Data Elements)

Definition & Importance

The Universal Data Elements (UDEs), as defined and mandated for collection by HUD, establish the **minimum data collection requirements** for all homeless, and near-homeless, housing &/or service projects entering data into HMIS (or Comparable Database) **regardless of funding source**.

UDEs collect information on the basic demographics of the population being served, including personally identifying information (PII), and therefore are critical to an HMIS's ability to produce the HUD required *unduplicated* estimates of the number of people at-risk of or currently experiencing homelessness.

Additionally, these elements provide information about access and use of homeless assistance projects, including patterns of service use, information on shelter stays, and episodes of homelessness over time.

HMIS UDE Benchmark & Requirements

> **Applies to 'Non-HMIS Participating projects: Yes** *those receiving federal, state, or county funds*
>
> **Applies to 'HMIS Participating projects: Yes**
>
> **CoC benchmark for UDE's applies to:**
> - **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

UDEs are collected **regardless of** *funding source* or the *number of project entries* a client may have in HMIS. *See chart in the Monitoring section under UDE for list of data elements and when to collect*. You can find more information here on the HUD Exchange - https://www.hudexchange.info/programs/hmis/hmis-data-standards/standards/universal-data-elements/.

Per the HMIS Policies and Procedures Manual, HMIS Participating projects **may not** create "Anonymous" records in HMIS. However, Clients do have the right to choose **not to share** their information by completing the '*MD BoS HMIS Client Data Sharing Opt-Out Form'* (see the HMIS Privacy Policy for details).

Completeness: PSDE (Program Specific Data Elements)

Definition & Importance

The Program Specific Data Elements (PSDE) have been designed by HUD to allow projects to meet data collection and reporting requirements per the HMIS Data Standards.

HMIS, and Comparable Databases, are required to provide for the collection of these data elements and any changes to PSDEs that may change over time. PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence and provide additional information about the characteristics of clients, the services they are provided, and project outcomes.

10/30/2025

HMIS PSDE Benchmark & Requirements

> **Applies to 'Non-HMIS Participating projects: Yes** *those receiving federal, state, or county funds*
>
> **Applies to 'HMIS Participating projects: Yes**
>
> **CoC benchmark for PSDE's applies to:**
> - **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

The **HUD Exchange Federal Partners landing page** serves as a gateway to the manuals that provide the specific PSDE data collection requirements per program and HMIS project type. You can find more information here on the HUD Exchange - https://www.hudexchange.info/programs/hmis/hmis-data-standards/standards/program-specific-data-elements/. *See chart in the Monitoring section under PSDE for list of data elements and when to collection is required.*

Completeness: Homeless Response System

> **Completeness: Homeless Response System** = Are all of the **clients served** in the CoC **entered into HMIS**?

Definition & Importance

A robust homeless response system includes HMIS project types that provide Emergency Shelter, Permanent &/or Transitional Housing. And for projects that are '*Services Only*', if they are dedicated &/or prioritized to serve clients at-risk of or experiencing homelessness in the community, the goal is for the data to be entered into HMIS (or Comparable Database) for clients served.

A high percentage of HMIS Homeless Response System Coverage is imperative for the community to understand the various ways in which a client is entering, and utilizing, the homeless response system beyond projects that provide beds/lodging for clients.

HMIS Benchmarks & Requirements

> **CoC benchmark for Homeless Response System:**
> - Individual projects are not monitored on this benchmark; rather the CoC as a whole is responsible to ensure that system coverage is as close to 100% as possible for all project type

Ensuring that a CoC's HMIS coverage reaches, and stays at, 100% requires implementing a process to ensure new projects that become available to serve clients at-risk of or experiencing homelessness are communicated to the HMIS Lead Team and that HMIS (or Comparable Database) data entry is encouraged &/or required for the new project.

The CoC will work with HMIS & CoC Lead Teams to ensure that system coverage is as close to 100% as possible for all project types.

10/30/2025

Timeliness

> **Timeliness** = Is the required client information **entered into HMIS** within the required period of time?

Definition & Importance

Data timeliness is the ***length of time*** between when HMIS information is ***collected*** and when that information is ***entered*** into HMIS.

<p style="text-align:center">Data timeliness CANNOT be edited – it can only be improved going forward</p>

The sooner data is entered into HMIS, the sooner it is available for the purposes of reporting, prioritization, data analysis, and making data-informed decisions.

When data is entered in a timely manner, it helps reduce human error that can occur when too much time has elapsed between the data collection/service transaction and the data entry.

HMIS Timeliness Benchmark & Requirements

> **Applies to 'Non-HMIS Participating projects: Yes** *those receiving federal, state, or county funds*
>
> **Applies to 'HMIS Participating projects: Yes**
>
> **CoC benchmark for Timeliness applies to:** Live time or with 3 days of client contact
> - **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

Entering data into HMIS (or *Comparable Database*) in a timely manner is necessary to ensure that clients receive or make connections to the services they need in a quick and efficient manner.

The CoC recognizes that HMIS data may not always be able to be entered live, and therefore have created minimum benchmarks and requirements.

Accuracy

> **Accuracy** = Are all clients in the **correct HMIS project**?
>
> Do the HMIS client records **accurately reflect** the true client information?

Definition & Importance

All data entered into HMIS (or Comparable Database) shall be a ***reflection of information provided by the client***. Recording inaccurate information is strictly prohibited. Refer to the '*Usage of 'Client Doesn't Know' – 'Client Prefers Not to Answer' – 'Data Not Collected*' section for addt'l information.

Inaccurate data (i.e., incongruent data) is evaluated at both the client and household levels, and highlights data elements that appear to rationally conflict with one or more other data elements.

10/30/2025

> **Applies to 'Non-HMIS Participating projects:** **Yes** *those receiving federal, state, or county funds*
>
> **Applies to 'HMIS Participating projects:** **Yes**
>
> **CoC benchmark for Accuracy applies to:**
> - **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

Due to the complexity of data accuracy, specific standards have not been developed. Some amount of data incongruity may be reasonable depending on a client's or a household's situation; *however*, providers should strive to minimize data incongruity that occurs without explanation to help ensure the data reported is accurately reflecting the state of homelessness in the MD BoS CoC.

Data accuracy is not easy to manage or monitor and requires analyzing client data, looking at congruency *between **and** among responses* to data elements within the system, as well as checks between *what the client has **told** the End User* and *what data is **entered** into HMIS* (or Comparable Database). *See chart in the Monitoring section under Accuracy tips on evaluating accuracy*.

Data for active clients enrolled into an HMIS project should be *reviewed* & *updated at minimum on a monthly basis*, to ensure that:

- Only data that is compatible with the HMIS project type has been entered into HMIS (i.e., a family is not enrolled into a single men or woman's shelter)
- Exit dates have been recorded for the date a client physically exited the project

Consistency

> **Consistency** = **Bridges data quality** across **data collection**, **entry**, and **management** stages and should be considered a shared responsibility across all HMIS stakeholders.

Definition & Importance

Consistency directly affects the accuracy of data. It is the degree to which all data is collected, entered, stored, and reflective of the use of HMIS as a standard operating procedure. Consistency is representative of how well completeness, accuracy, and timeliness standards have been operationalized across the data collection and data entry stages.

HMIS Consistency Benchmark & Requirements

> **Applies to 'Non-HMIS Participating projects:** **Yes** *those receiving federal, state, or county funds*
>
> **Applies to 'HMIS Participating projects:** **Yes**
>
> **CoC benchmark for Consistency applies to:**
> - **All Project Types**: Refer to the chart 'DQ Benchmarks – Maximum Error Rate Allowable by Project Type'

10/30/2025

Examples of efforts to operationalize Consistency across HMIS include:

- **New End User Training Requirements:**
  All End Users will complete an initial training before given access to the live HMIS system. It is critical that all End Users *operate from a common understanding* of each data element, its response options, and meaning

- **End User HMIS Activity Requirements:** End Users who have not accessed HMIS in the below timeframes will have their HMIS license inactivated.

  - End Users with a '*Data Entry*' license must access & actively use the system at least 1x every 30-days

  - End Users with a '*Read Only*' license must access & actively use the system at least 1x every 90-days

- **HMIS Client Data Sharing Opt-Out Forms**:
  Ensuring that the process for restricting a client *HMIS project enrollment record* has been properly completed for all clients that have signed this form

- **HMIS Data Entry**:
  Ensuring that End Users are following the *HMIS data entry workflows* applicable to the project type

- **Changing or Terminating HMIS Access Requirement:**
  The HMIS PoC is responsible for informing the HMIS Lead Team of End Users whose HMIS access needs to be *terminated* (no longer employed, job duties no longer require HMIS access, etc.) &/or need a *change* made to their HMIS access (EDA change, HMIS user role change, etc.)

Section 4: Monitoring

Purpose

The CoC recognizes that the data produced from the MD BoS HMIS is critical to meet the reporting and compliance requirements of individual Partner Agencies and the CoC as a whole.

As such, all Partner Agencies, *regardless of fund source OR participation status*, are expected to meet the data quality benchmarks described in this document.

Ongoing HMIS, and Comparable Database, data quality monitoring will be conducted to the goal of ensuring Partner Agencies maintain a high level of data quality at all times with a minimal amount of data clean-up. Data quality issues that are the result of problems with a data entry process will be noticed more quickly with regular monitoring, and corrections to data entry processes can be implemented earlier to minimize the amount of corrections that will be necessary. Additionally, it is easier to make corrections to recent records where a client is still available and/or before a problem is compounded by information added at a later date.

Process

To ensure that the data quality requirements outlined in this document are being met by all Partner Agencies, monitoring of data quality will, at minimum, occur:

- **Monthly**: Partner Agencies are to *self-monitor* the HMIS (or Comparable Database) data quality of each individual project, and if necessary make corrections, each month to ensure DQ benchmarks are being met

- **Quarterly**: The HMIS Lead Team will run the custom *MD BoS HMIS DQ Monitoring Report* for HMIS Participating projects & post an '*All Star List*' to the MD BoS HMIS website showing the HMIS Participating Projects that are meeting the DQ benchmarks

  * Non-HMIS Participating projects utilizing a Comparable Database for client data may opt to be included by providing the HMIS Team with *unduplicated aggregate report(s)* containing the required information **prior** to the 'All Star' list being posted each quarter

- **Semi-Annually / Annually**: Depending on the DQ component, monitoring will be done on a semi-annual or annual basis. Partner Agencies are to follow the '*Monitoring Process*' as outlined below for each DQ component

The HMIS Lead Team will contact the Partner Agency HMIS PoC of any project not meeting the minimum DQ benchmarks two (2) or more times in a 12-month period (*incomplete / missed submissions will be counted as not meeting benchmarks*), and work with them on a plan to improve and meet the benchmarks moving forward. This may include implementation of a formal Data Quality Improvement Plan (DQIP).

DQ Monitoring Timeframes

Semi-Annual Follows the DHCD Fiscal Year: July 1st – June 30th	Data Under Review	PoC to submit Semi-Annual DQ Monitoring to HMIS Lead Team by
1st Semi-Annual Review	July 1st – December 31st	**January 15th**
2nd Semi-Annual Review	July 1st – December 31st **+** January 1st – June 30th	**July 15th**

To ensure that Partner Agencies, and End Users, are aware of the minimum data entry requirements they are required to meet, the most current HMIS Data Quality Plan will be posted to the MD BoS HMIS website.

10/30/2025

Partner Agency Self-Monitoring of HMIS Project Data Quality

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: Monthly

To have *reliable data* for the **Quarterly** 'All Star' list, and to *reduce data clean-up* needed during **Semi-Annual** & **Annual** monitoring periods, HMIS PoC's are responsible for self-monitoring data quality of <u>each individual</u> HMIS Participating and Non-HMIS Participating project on a monthly basis, correcting data in the client records as necessary, to ensure that DQ benchmarks are being met.

Monitoring Process:

- Partner Agency - HMIS PoC Responsibilities:
  - **HMIS Participating Projects:** Below are several reporting resources that PoC's can use for self-monitoring HMIS project data. 'How-To' guides & past training material can be found on the HMIS website for many of the reports

    ➢ Canned HMIS Reports
      - Are available to anyone with an active HMIS End User license
      - The CoC APR report is frequently used by HMIS projects to monitor data quality & information on how to pull & analyze the report can be found on the HMIS website
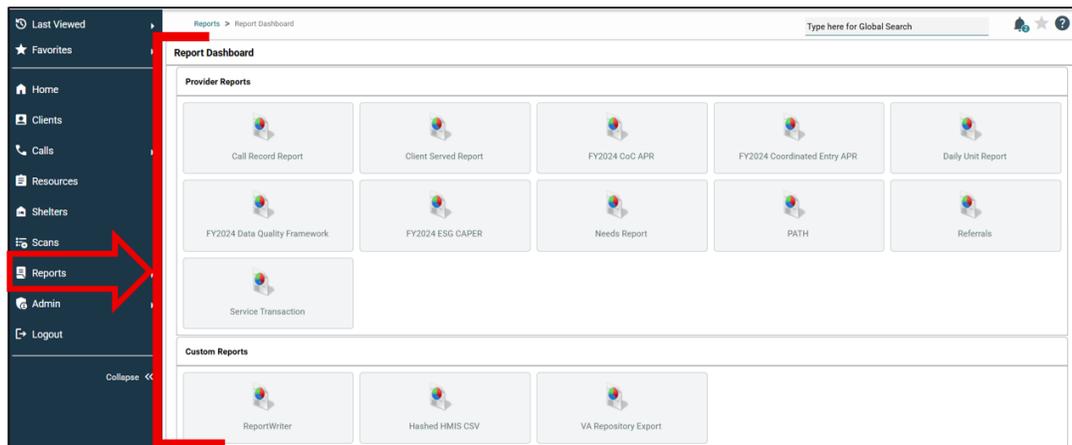
    ➢ Business Objects Reports
      - Requires an ART / Business Objects license, which is issued to the Partner Agencies PoC(s). This is in addition to the HMIS license provided to all End Users
    ➢ Eva
      - This HMIS tool was created by HUD & requires the 'canned' HMIS report: Hashed HMIS CSV to be uploaded. Link to the Eva website - https://hmis.abtsites.com/eva/

  - **Non-HMIS Participating Projects** that provide services with **federal, state, or county funds*:
    - Will use reports available to them in the Comparable Database that they utilize

Completeness Monitoring

Data completeness is evaluated to ensure Partner Agencies are completing data entry to the best of their ability. This includes updating records and, as additional client interactions take place, entering new information learned.

The MD BoS CoC encourages all Partner Agencies to aspire to *100% collection of all data elements*, but recognize that 100% data Completeness may not be realistic or possible in all cases. ***Ultimately, the quality of data is the responsibility of the Partner Agency***.

Therefore, the MD BoS CoC has created data quality benchmarks and requirements based on the *HMIS project type* to accommodate various situations and ensure all HUD requirements are met. Refer to the chart '*Data Quality Benchmark Maximum Error Rate Allowable by Project Type*' at the beginning of the section 'CoC Minimum Data Quality Standards'.

Completeness: PDDE

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: Annually

An annual review of PDDEs will be done on all projects in HMIS, including '*Non-HMIS Participating*' projects as they are required to participate in the annual PIT/HIC, during the ***2nd Semi-Annual Review period***.

This will also serve as preparation for the annual LSA reporting done in the 4th quarter of each calendar year & PIT/HIC reporting done in the 1st quarter of each calendar year.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- HMIS Lead Team Responsibilities:
  - Send PDDEs to the HMIS PoC for review
- Partner Agency - HMIS PoC Responsibilities:
  - Review PDDEs for each HMIS project
  - Respond to HMIS Lead Team and either:
    - Confirm PDDEs are accurate; ***OR***
    - Provide correct information

Completeness: Bed/Unit Utilization & Inventory

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: Semi-Annually ** In Development ** See note in *Appendix D: HMIS Data Quality Plan Change History chart*

For each applicable project type, the HMIS PoC is to verify accuracy of Bed and Unit Inventory (BUI) information & Utilization to the HMIS Lead Team on a semi-annual basis, by the due date noted in the '*DQ Monitoring Timeframe*' chart. *see the HMIS Data Standards for addt'l details on providing accurate '*2.07 Bed and Unit Inventory Information*'.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- Partner Agency - HMIS PoC Responsibilities:

10/30/2025

- **HMIS Participating Projects**:
    - Run the *XXX Report* for *each individual* HMIS Participating project
    - Review the Inventory (BUI) numbers & Utilization Rates
        - If the *INVENTORY* numbers (BUI) *are not* accurate, provide correct inventory counts to the HMIS Team & request it be updated in HMIS
        - If *UTILIZATION* rates are *not correct*, ensure that all clients:
            - Served in the report period have been entered into the project (remedying *under*-utilization); and
            - Exited in the report period have been exited from the project (remedying *over*-utilization)
        - * If changes were made to BUI *or* corrections made to HMIS client records – make sure to *rerun* the report
    - Submit final report to the HMIS Lead Team via the HMIS Help Desk
        - If BUI &/or Utilization does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided
- **Non-HMIS Participating Projects** that provide services with **federal, state, or county funds*:
    - Run report(s) that will provide the HMIS Lead Team with the required information
    - Review the BUI and Utilization data
        - If needed, make corrections to HMIS client records & rerun the report
    - Submit *unduplicated aggregate report(s)* to the HMIS Lead Team via the HMIS Help Desk
        - If BUI &/or Utilization does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided

Completeness: UDE

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: **Semi-Annually**

HMIS PoC is to verify UDE data quality for *each individual* project to the HMIS Lead Team on a semi-annual basis, by the due date noted in the '*DQ Monitoring Timeframe*' chart.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- Partner Agency - HMIS PoC Responsibilities:
    - **HMIS Participating Projects**:
        - Run the *MD BoS HMIS DQ Monitoring Report* for *each individual* HMIS Participating project
        - Review report
            - If needed, make corrections to HMIS client records & rerun the report
        - Submit final report to the HMIS Lead Team via the HMIS Help Desk
            - If does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided
    - **Non-HMIS Participating Projects** that provide services with **federal, state, or county funds*:
        - Run report(s) that will provide the HMIS Lead Team with the required information
        - Review report

10/30/2025

- If needed, make corrections to HMIS client records & rerun the report
  - Submit *unduplicated aggregate report(s)* to the HMIS Lead Team via the HMIS Help Desk
    - If does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided

The below chart shows the *Universal Data Elements* (UDE)and when they are to be collected.

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
3.01 Name	X				X					
3.02 Social Security Number	X				X					
3.03 Date of Birth	X				X					
3.04 Race & Ethnicity	X				X					
3.07 Veteran Status				X	X					
3.08 Disabling Condition	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 Enrollment CoC		X				X				
3.20 Housing Move-in Date		X					X**			
3.917 Prior Living Situation			X			X				

** **HMID** = Date Client Physically Moved into Housing

Completeness: PSDE

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: **Semi-Annually**

HMIS PoC is to verify PSDE data quality for *each individual* project to the HMIS Lead Team on a semi-annual basis, by the due date noted in the '*DQ Monitoring Timeframe*' chart.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

10/30/2025

- Partner Agency – HMIS PoC Responsibilities:
  - **HMIS Participating Projects**:
    - Run the **_MD BoS HMIS DQ Monitoring Report_** for *each individual* HMIS Participating project
    - Review report
      - If needed, make corrections to HMIS client records & rerun the report
    - Submit final report to the HMIS Lead Team via the HMIS Help Desk
      - If does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided
  - **Non-HMIS Participating Projects** that provide services with *federal, state, or county funds*:
    - Run report(s) that will provide the HMIS Lead Team with the required information
    - Review report
      - If needed, make corrections to HMIS client records & rerun the report
    - Submit **_unduplicated aggregate report(s)_** to the HMIS Lead Team via the HMIS Help Desk
      - If does not meet the minimum DQ benchmark, an explanation and plan for improvement must be provided

The below chart shows the _Common Program Specific Data Elements_ (PSDE) and when they are to be collected.

Federal Partner Programs (CoC, HOPWA, PATH, RHY, VA) may have additional required PSDEs. The Federal Partner Program HMIS manuals can be found at **https://www.hudexchange.info/programs/hmis/federal-partner-participation/**.

Common PSDEs	Data Collected For				When the Data is Collected					
	All Clients	HoH Only	HoH & All Adults	Adult Clients Only	Record Creation	Project Start	At Occurrence	At Update	Annual Assessment	At Exit
4.02 Income and Sources			X			X		X	X	X
4.03 Non-Cash Benefits			X			X		X	X	X
4.04 Health Insurance	X					X		X	X	X
4.05 Physical Disability	X					X		X		X
4.06 Developmental	X					X		X		X
4.07 Chronic Health	X					X		X		X
4.08 HIV/AIDS	X					X		X		X
4.09 Mental Health	X					X		X		X
4.10 Substance Abuse	X					X		X		X
4.11 Domestic Violence			X			X		X		
4.12 Current Living Situation (i.e.			X			X	X			

4.13 Date of Engagement (when			X				X			
4.14 Bed-Night Date	X						X			
4.19 Coordinated Entry Assessment		X					X			
4.20 Coordinated Entry Event		X					X			
4.21 Sex	X				X					

Completeness: Homeless Response System Coverage

Frequency: Annually

The HMIS Lead Team will review and update the CoCs' most recent Housing Inventory Chart (HIC) to know which projects participated in the most recent HIC but are not entering data into HMIS (or Comparable Database) on an annual basis.

The HMIS & CoC Lead Teams, in conjunction with the CoC, will work the strategies below with the goal of increasing HMIS Bed and Response System coverage to 100%.

Monitoring Process:

- Ensure that all new projects available within the CoC serving clients who are homeless, or at-risk of homelessness, are required &/or encouraged to enter data into HMIS

- Provide a streamlined, simple process for new Partner Agencies &/or projects to communicate to the HMIS Lead Team about new projects operating within the community

- Work with state and local funders to understand the importance of HMIS and encourage all funders to require the use of HMIS for grantees

Timeliness Monitoring

> **Applies to 'Non-HMIS Participating projects: Yes**
>
> **Applies to 'HMIS Participating projects: Yes**

Frequency: **Semi-Annually**

HMIS PoC is to verify Timeliness of data entry for **each individual** project to the HMIS Lead Team on a semi-annual basis, by the due date noted in the '*DQ Monitoring Timeframe*' chart.

*** Data timeliness CANNOT be edited - It can only be improved going forward ***

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- Partner Agency - HMIS PoC Responsibilities:
  - **HMIS Participating Projects**:
    - Run the ***MD BoS HMIS DQ Monitoring Report*** for *each individual* HMIS Participating project
    - Review report

- Submit report to the HMIS Lead Team via the HMIS Help Desk
  - If does not meet the minimum DQ benchmark, an *explanation and plan for improvement* must be provided

- **Non-HMIS Participating Projects** that provide services with **federal, state, or county funds*:
  - Run report(s) that will provide the HMIS Lead Team with the required information
  - Review report
  - Submit **unduplicated aggregate report(s)** to the HMIS Lead Team via the HMIS Help Desk
    - If does not meet the minimum DQ benchmark, an *explanation and plan for improvement* must be provided

The below chart shows *Entry/Exit Timeliness* requirements (note the specific project type Exit Exceptions).

HMIS Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry inHMIS)
All Project Types	**Entry**	Live time or within **3 calendar days** of a client contact/service
All Project Types	**Exit**	Live time or within **3 calendar days** of a client contact/service
		Exit Exceptions for the following Project Types: • ES – E/E Workflow: On the morning of the day the client does not return, project will Back date to the date of last shelter night stay and exit client • ES – NbN Workflow: On the morning of the day the client does not return, project will Back date to the date of last shelter night stay and exit client • St. O - Formal Project Exit: Live time or within 3 calendar days of project exit • St. O – No Contact Exit: After 90-days of no contact, record project exit within 3 calendar days (Back-dated to date of last contact)

Accuracy Monitoring

Applies to 'Non-HMIS Participating projects: Yes**

   ** On applicable areas of this DQ Component

   ** HMIS Lead will not access the Comparable Database, but rather rely on aggregate reports from the Comparable Database and interviews with project staff

Applies to 'HMIS Participating projects: Yes

Frequency: Annually

Timely corrections / updates to HMIS data elements is expected for all data entered into HMIS (or Comparable Database), by all projects types, on a monthly basis. The 'HMIS Annual Monitoring Tool' (see Appendix B) will be used to monitor components of Accuracy.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- HMIS Lead Team Responsibilities:
  - Notify the HMIS PoC in advance:
    - Date/Time of when an HMIS Annual Monitoring will occur
    - If applicable, documentation &/or reports the HMIS PoC is to have prepared (including report parameters)
    - If applicable, ID's of client records the HMIS PoC needs to have prepared for review of physical/hard copy records & HMIS records

- Partner Agency - HMIS PoC Responsibilities:
  - Acknowledge/confirm scheduled time for the HMIS Annual Monitoring
  - Prepare requested items

The below chart is an example of how to check the accuracy and congruency of several HMIS data elements:

UDE Accuracy Measure	Data Element(s) Involved	Accuracy Test
Date of Birth <> Project Start Date	3.03 Date of Birth	*3.03* is not the same date as *3.10* for Heads of Household
	3.10 Project Start Date	
Household Error	3.15 Relationship to Head of Household	At least one, **and only one**, Head of Household per household (no HoH is an error, multiple HoH is an error)
		No infant or young child Heads of Household
Prior Living Situation and Dependencies are Congruent	3.917 Prior Living Situation • Length of time in previous place • Approximate date homelessness started • Number of times experiencing homelessness in the last three years • Number of months experiencing homelessness in the last three years	Dependencies (Approx. Date, Time, and Months) answered if 3.917 / Length of Time indicate the client came from a homeless situation
Disabling Condition has a Source	3.08 Disabling Condition	If Yes to *3.08*, then Yes to *at least one 4.05 – 4.10*
	4.05 Physical Disability	If Yes to *3.08*, then Yes to *at least one 4.05 – 4.10*
	4.06 Developmental Disability	
	4.07 Chronic Health Condition	
	4.08 HIV/AIDS	
	4.09 Mental Health Disorders	
	4.10 Substance Use Disorder	
Monthly Income has a Source	4.02 Income & Sources	If Yes to *4.02* – then Yes to *at least one source* If any *Source* is selected as YES – then *4.02* must be Yes

Non-Cash Benefits has a Source	4.03 Non-Cash Benefits	If Yes to *4.03* – then Yes to *at least one source*
		If any *Source* is selected as YES – then *4.03* must be Yes
Health Insurance has a Type	4.04 Health Insurance	If Yes to *4.04* – then Yes to at least one *source*
		If any *Source* is selected as YES – then *4.04* must be Yes
Domestic Violence and Dependencies arecongruent	4.11 Domestic Violence	If Yes to *4.11* – then *dependencies *When and Fleeing* are answered*
		If No to *4.11* – then *dependencies* are *not answered*
	When experience occurred	If answered, *4.11* is Yes and other *dependency* is answered
	Are you currently fleeing	
Veterans are Not Minors	3.07 Veteran Status	*3.07* is **not Yes** for clients **under** 18-yrs of age
	3.03 Date of Birth	
Client Location is	3.16 Enrollment CoC	*3.16* for a client enrollment matches
	2.02 Project Information	
	2.03 Continuum of Care Information	
Project funding sources match clients	2.02 Project Information	Clients in project **are specific to** the **Project Type** – examples include: • Age(Minor / Youth / Adult-only) • Household (Singles / Families-only) • Gender • Veteran (Veteran Dedicated) • Disabling Condition Required
	2.06 Funding Sources	
Housing Move-In Date is Accurate	3.20 Housing Move-In Date	Ensure the *3.20* **does not** predate *3.10*
	3.10 Project Start Date	

Consistency Monitoring

Applies to 'Non-HMIS Participating projects: Yes**

   ** On applicable areas of this DQ Component

   ** HMIS Lead will not access the Comparable Database, but rather rely on aggregate reports from the Comparable Database and interviews with project staff

Applies to 'HMIS Participating projects: Yes

Frequency: Annually

The 'HMIS Annual Monitoring Tool' (see Appendix B) will be used to monitor components of Consistency, which will include (as applicable):

10/30/2025

- **New End User Training Requirements:**
  All End Users will complete an initial training before given access to the live HMIS system. It is critical that all End Users **operate from a common understanding** of each data element, its response options, and meaning

- **End User HMIS Activity Requirements:** End Users who have not accessed HMIS in the below timeframes will have their HMIS license inactivated.
  - End Users with a '_Data Entry_' license must access & actively use the system at least 1x every 30-days
  - End Users with a '_Read Only_' license must access & actively use the system at least 1x every 90-days

- **HMIS Client Data Sharing Opt-Out Forms**:
  Ensuring that the process for restricting a client **HMIS project _enrollment_ record** has been properly completed for all clients that have signed this form

- **HMIS Data Entry**:
  Ensuring that End Users are following the **HMIS data entry workflows** applicable to the project type

- **Changing or Terminating HMIS Access Requirement:**
  The HMIS PoC is responsible for informing the HMIS Lead Team of End Users whose HMIS access needs to be **terminated** (no longer employed, job duties no longer require HMIS access, etc.) &/or need a **change** made to their HMIS access (EDA change, HMIS user role change, etc.)

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- HMIS Lead Team Responsibilities:
  - Notify the HMIS PoC in advance:
    - Date/Time of when an HMIS Annual Monitoring will occur
    - If applicable, documentation &/or reports the HMIS PoC needs to have prepared (including report parameters)
    - If applicable, ID's of client records the HMIS PoC needs to have prepared for review of physical/hard copy records & HMIS records

- Partner Agency - HMIS PoC Responsibilities:
  - Acknowledge/confirm scheduled time for the HMIS Annual Monitoring
  - Prepare requested items

New HMIS Project Monitoring

Applies to 'Non-HMIS Participating projects: No

Applies to 'HMIS Participating projects: Yes

Frequency: Initial 90-days

For the initial 90-days of entering client data into HMIS, all new 'HMIS Participating' projects will complete monthly monitoring using the processes outlined above for UDEs, PSDEs, and Timeliness.

This is to ensure data entry is running smoothly and to find any fundamental issues with project set-up or data entry processes that are negatively impacting data quality to address them quickly.

Monitoring Process for HMIS Projects included in Monitoring Cyle:

The HMIS Lead Team will contact the HMIS PoC to provide dates that DQ monitoring submissions will be due monthly for the first 90-days of project entering client data into HMIS.

10/30/2025

If the Partner Agency has not previously completed the DQ monitoring process for other projects, the HMIS Lead Team will review the process for each Data Quality Component with them.

Section 5: Data Quality Improvement

Purpose

The HMIS Lead Team will work to ensure Partner Agencies have access to all the support and tools they need to achieve a high level of data quality within HMIS. The following processes are designed to demonstrate to Partner Agencies the importance of data quality within HMIS and encourage its prioritization within their daily functions.

Continuous Data Quality Improvement Process

Partner Agencies with an HMIS project identified as having opportunities for data quality improvement are permitted a minimum of 30-days to correct their data quality issues The HMIS Lead Team may offer additional support &/or training to the Partner Agency until such a time as they effectively demonstrates an ability to meet the DQ benchmarks laid out in the Data Quality Plan.

Data Quality Improvement Plan

A Data Quality Improvement Plan (DQIP) is a detailed work plan intended to support and enhance a Partner Agencies data quality in a specific area using concrete, time-bound action steps.

The DQIP is a collaborative effort between the Partner Agency and the HMIS Lead Team, with the HMIS Lead Team providing support to the Partner Agency with appropriate resources and training to ensure the goals and objectives in the DQIP are successfully achieved.

Initiation

A DQIP may be implemented by the HMIS Lead Team when a quarterly, semi-annual, or annual monitoring shows one or more ongoing improvement opportunities related to data quality within a given Partner Agency (i.e., ongoing is defined as the improvement opportunity lasting longer than a specific period of time as defined by the HMIS Lead without resolution).

Evaluation

Dependent upon DQIP evaluation results, the appropriate process from the options below will take place:

1. Partner Agencies that *do meet* required minimum standards will have their DQIP concluded by the HMIS Lead and will return to the regular monitoring and oversight process.

2. Partner Agencies that *do not meet* data quality standards by the end of their DQIP period, but have shown improvement, may have their DQIP extended to facilitate and ensure continued improvement.

3. Partner Agencies that *do not meet* data quality standards by the end of their DQIP period and have not shown improvement or active engagement in their DQIP will be contacted by the HMIS Lead Team regarding next steps.

Partner Agencies that continue to demonstrate an inability to meet minimum data quality benchmarks and a lack of engagement may have their HMIS access suspended at the discretion of the HMIS Lead Team to preserve the integrity of HMIS data throughout the CoC and ensure that other agencies do not suffer due to poor data quality from a single Partner Agency.

Suspension will be a last resort and will not occur without all other options being considered nor without extensive communication between the Partner Agency and the HMIS Lead Team. The removal of this suspension will be up to the discretion of the HMIS Lead Team.

10/30/2025

HMIS Annual Monitoring Tool

The HMIS Lead Team will use a standard *HMIS Annual Monitoring Tool* (see Appendix C) to evaluate compliance of this *HMIS Data Quality Plan, HMIS Policies and Procedures Manual, Partner Agency Agreements, End User Agreements*, and any other documents governing the use of the MD BoS HMIS.

If data quality improvement opportunities are identified in any area during the evaluation the HMIS Lead Team may decide that a *Data Quality Improvement Plan* (DQIP) will be developed to assist the Partner Agency in addressing improvement opportunities using concrete, time-bound action steps.

Applies to 'Non-HMIS Participating projects: Yes**

    ** On applicable areas of this DQ Component

    ** HMIS Lead will not access the Comparable Database, but rather rely on aggregate reports from the Comparable Database and interviews with project staff

Applies to 'HMIS Participating projects: Yes

Monitoring Process for HMIS Projects included in Monitoring Cyle:

- HMIS Lead Responsibilities:
  - Notify the HMIS PoC in advance:
    - Date/Time of when an HMIS Annual Monitoring will occur
    - If applicable, documentation &/or reports the HMIS PoC needs to have prepared (including report parameters)
    - If applicable, ID's of client records the HMIS PoC needs to have prepared for review of physical/hard copy records & HMIS records

- Partner Agency - HMIS PoC Responsibilities:
  - Acknowledge/confirm scheduled time for the HMIS Annual Monitoring
  - Prepare requested items

Appendix A: Data Quality Improvement Plan

DATA QUALITY IMPROVEMENT PLAN

Monitoring Time Period (Start and End Date of Data Being Reviewed)**:**

Partner Agency Name:

HMIS Project Name and ID:

The purpose of this plan is to improve outcomes for individuals and families served, strengthen the delivery of effective services, support partnerships throughout the CoC, and to establish ongoing self-monitoring and continuous improvement.

Should the Partner Agency have multiple HMIS projects requiring a DQIP, each HMIS project will have its own DQIP completed.

Issue	Benchmark Not Being Met	How to Address	How Often and Who is Responsible	Date To Complete By
1.				
2.				

10/30/2025

DQIP Additional Narrative:

> **Example:**
> Should the Partner Agency not remain communicative and interactive with the HMIS Lead to address the issue by following through with the above steps, the CoC will consider this DQIP in default and will use incentives and enforcements available, including a loss of supports and dollars currently provided to the Partner Agency.

Acknowledgement of Data Quality Improvement Plan

HMIS PoC (print & sign): _____   Date: _____

HMIS Lead Team (print & sign): _____   Date: _____

DQIP Close-Out Evaluation		
Was the Issue Corrected?	**Current Project Monitoring Results**	**What is the Partner Agencies Plan To Continue Meeting Benchmark Going Forward?**
1.		
2.		

Acknowledgement of DQIP Close-Out Evaluation

HMIS PoC (print & sign): _____   Date: _____

HMIS Lead Team (print & sign): _____   Date: _____

10/30/2025

Appendix B: HMIS DQ Resources

- Link to MD BoS HMIS Website – HMIS | MD Balance of State

- Links to HUD Exchange Resources
    - HMIS Data Standards
        - https://www.hudexchange.info/resource/3824/hmis-data-dictionary/
        - https://www.hudexchange.info/programs/hmis/hmis-data-standards/
        - https://www.hudexchange.info/programs/hmis/hmis-data-standards/standards/introduction-to-hmis-data-standards/
    - Fed Partner Program Specific Data Elements (CoC, HOPWA, PATH, RHY, VA)
        - https://www.hudexchange.info/programs/hmis/federal-partner-participation/
        - https://www.hudexchange.info/programs/hmis/hmis-data-standards/standards/federal-partner-program-specific-data-elements/
    - Homeless Eligibility
        - https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-homeless-eligibility/coc-and-esg-homeless-eligibility-overview/

10/30/2025

Appendix C: HMIS Annual Monitoring Tool

**In Development ** See note in *Appendix D: HMIS Data Quality Plan Change History* chart

Appendix D: HMIS Data Quality Plan Change History

Version #	Date Final	Revisions

V1		• Approved by HMIS DQ Sub-Cmte on 9/25/25
		• Published & Implemented on 10/31/25
		• 1st Semi-Annual Monitoring Reports are due 1/15/26
		
		==The below sections will be updated & published in subsequent versions==
		  * ***Appendix C: HMIS Annual Monitoring Tool*** – is in development & will be inserted once completed
		
		  * ***Completeness: Bed/Unit Utilization & Inventory***' – is not included in the custom <u>MD BoS HMIS DQ Monitoring Report</u> & is on hold until the custom report ***specific to this data element*** is developed. Once custom report for this data element has been developed:
		    ➢ Report name will be noted
		    ➢ Partner Agencies will be notified
		    ➢ PoC's of HMIS Participating Projects will be trained on how to run/review report for this data element
		    ➢ Monitoring process for both HMIS Participating & Non-HMIS Participating Projects will begin