



Alaska Homeless Management Information System (AKHMIS)

Data Quality Plan

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IMPORTANT ACRONYMS	
ACEH	Anchorage Coalition to End Homelessness
AK	Alaska
AKCH2	Alaska Coalition on Housing and Homelessness
AKHMIS	Alaska Homeless Management Information System
AMHTA	Alaska Mental Health Trust Authority
CoC	Continuum of Care
DQP	Data Quality Plan
DQIP	Data Quality Improvement Plan
ESG	Emergency Solutions Grant
HHS	Department of Health and Human Services
HIC	Housing Inventory Count
HMIS	Homeless Management Information System
HUD	Department of Housing and Urban Development
ICA	Institute for Community Alliances
LSA	Longitudinal System Analysis
PDDEs	Project Descriptor Data Elements
PIT	Point in Time Count
PPI	Protected Personal Information
PSDEs	Program Specific Data Elements
SPMs	System Performance Measures
UDEs	Universal Data Elements
VA	Department of Veterans Affairs

1 INTRODUCTION

BACKGROUND

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 implemented data system used to record and analyze client, service, and housing data for individuals and families who are experiencing homelessness or at-risk of homelessness.

The U.S. Department of Housing and Urban Development (HUD) through the Office of Special Needs Assistance Programs (SNAPS) partners with other federal agencies to establish the requirements for HMIS to ensure that there is a comprehensive data response to the congressional mandate to report annually on national homelessness. It is used by all projects that target services to persons experiencing homelessness within SNAPS and the office of HIV-AIDS Housing. It is also used by other federal partners from the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Veterans Affairs (VA) and their respective programs to measure project performance and participate in benchmarking of the national effort to end homelessness.

From the [FY 2024 HMIS Data Standards](#)

In May of 2023, HUD published the [FY 2024 HMIS Data Standards](#) and the [FY 2024 HMIS Data Standards Data Dictionary](#), the current HMIS Data Standards at the time of this document's creation. These [FY 2024 HMIS Data Standards](#) are effective October 1, 2023, and remain in effect unless and until updated.

All projects and programs entering data into HMIS, regardless of funding source, are required to provide data consistent with these standards.

1.1 WHAT IS DATA QUALITY AND WHY DOES IT MATTER?

Data quality is the extent to which the information contained in HMIS accurately represents the real-world clients and situations it is meant to describe.

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

- Provides a clearer understanding of homelessness within the community, 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 direct care staff 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 and may determine 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;
 - The funding opportunities providers apply for; and
 - A provider's ability to obtain funding to provide needed services to individuals at risk of and/or experiencing homelessness.

1.2 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:

DATA QUALITY PLAN

- 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.

2 THE AKHMIS DATA QUALITY PLAN

PURPOSE

The AKHMIS Data Quality Plan sets expectations for the AK CoCs, the Institute for Community Alliances (ICA) as the HMIS Lead, AKHMIS-participating organizations, and AKHMIS end users to ensure valid and reliable data is captured on all persons accessing homelessness services in the state of Alaska.

2.1 OVERVIEW

This document identifies the data to be entered into AKHMIS by AKHMIS-participating organizations, defines data quality, provides the specific data quality goals and standards set forth by the AK CoCs, and finally outlines how high-quality data will be achieved through cooperation between the AK CoCs, ICA, and AKHMIS-participating organizations. Attachments to this plan include an [AKHMIS Monitoring Tool](#) worksheet for standardized evaluation and an outline of a [Data Quality Improvement Plan](#) for use in situations where an organization's data quality consistently has room for improvement and extra assistance is necessary to meet data quality standards.

2.2 PARTICIPATION

All AKHMIS-participating organizations are expected to participate in this AKHMIS Data Quality Plan. Federally funded homeless services programs are required to use AKHMIS, as well as some Alaska state-funded homeless services programs, and high-quality data is necessary for accurate reporting. Additionally, system-wide data are used to analyze trends and inform community planning, therefore all data being entered into AKHMIS are expected to meet the standards in this plan to ensure an accurate overall picture of homelessness within the state of Alaska, regardless of a requirement to use AKHMIS.

ROLES AND RESPONSIBILITIES

The [AKHMIS Governance Documents](#) outline the roles and responsibilities of the AK CoCs, the Institute for Community Alliances (ICA) as the HMIS Lead, AKHMIS-participating organizations, and AKHMIS end users in the implementation and use of AKHMIS. In the administration of the AKHMIS Data Quality Plan, the AK CoCs work will with ICA to ensure all AKHMIS-participating organizations have access to the tools they need to achieve high data quality. ICA will provide data entry training to AKHMIS end users and data quality reports for monitoring as described within this AKHMIS Data Quality Plan. The AK CoCs will work with ICA to monitor data quality and ensure that any data quality concerns are acknowledged and acted upon by the AKHMIS participating organization in a timely manner to maintain the overall data quality within AKHMIS. The AK CoCs will also provide incentives to maintain a high level of data quality and ensure AKHMIS-participating organizations' accountability for non-responsiveness to data quality concerns.

2.3 ORGANIZATION PARTNERSHIP AGREEMENT

Every organization participating in AKHMIS must sign an [Organization Partnership Agreement](#) that includes agreement to meet all the applicable data quality standards as defined in the statewide AKHMIS Data Quality Plan.

3 AKHMIS DATA

3.1 UNIVERSAL DATA ELEMENTS

3.1.1 PURPOSE/IMPORTANCE

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

These elements collect information on the basic demographics of the population being served, including Protected Personal Information (PPI), and therefore are critical to an AKHMIS’s ability to produce 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.

3.1.2 COLLECTION

All projects participating in AKHMIS are required to collect the UDEs, regardless of funding source. The Protected Personal Information (PPI) UDEs (3.01 through 3.07) must be collected once per client, regardless of how many project stays that client has in the system. The remaining UDEs (3.08 through 3.917) are to be collected at least once per project stay. The timing of when the data are to be collected and about whom is noted in each data element.

TYPE OF DATA	DATA ELEMENT	WHY WE COLLECT IT
<p style="text-align: center;">CLIENT IDENTIFIER DATA</p> <p><i>One Value per Client Record</i></p> <p>Collected once per client, regardless of project stays. Incorrect or outdated data must be corrected in the original record.</p>	<p style="text-align: center;">Name</p>	<p>HMIS records should use a client's full and accurate name whenever possible. If the client doesn't associate with their legal name, the name entered into HMIS should reflect the name the client identifies with, unless legal name is required by the funder (e.g., VA). A full, legal name supports the unique identification of each person served.</p>
	<p style="text-align: center;">Social Security Number (SSN)</p>	<p>Social Security Number (SSN) significantly supports the unique identification of each person served.</p> <p><i>An important objective for ending homelessness is to increase access and utilization of mainstream programs. SSN is required for many mainstream programs and projects may need SSN to help clients access mainstream services.</i></p>
	<p style="text-align: center;">Date Of Birth (DOB)</p>	<p>Date of Birth (DoB) is used to calculate a client's age at any point during a project stay and supports the unique identification of each person served.</p>
	<p style="text-align: center;">Race</p>	<p>Race and Ethnicity Clients self-identify with one or more of different racial and/or ethnic categories.</p>
	<p style="text-align: center;">Gender</p>	<p>Gender Clients self-identify with one or more of the gender categories.</p> <p style="text-align: right;"><i>Supports system planning, local, and national understanding of who is experiencing homelessness.</i></p>
	<p style="text-align: center;">Veteran Status</p>	<p>Indicates whether clients have ever spent time in the United States armed forces.</p> <p><i>Supports an accurate count of how many veterans experience homelessness, useful for screening for possible housing/service interventions, helps understanding of veterans' service needs.</i></p>

<p>PROJECT STAY DATA</p> <p><i>One or More Value(s) per Project Stay for a Client or Household</i></p> <p>Must be collected or reviewed/updated upon EVERY project stay.</p>	<p>Disabling Condition</p>	<p>Indicates whether clients have a HUD Defined disabling condition. <i>Used with other information to identify whether a client meets the criteria for chronic homelessness.</i></p>	
	<p>Project Start Date</p>	<p>The date a client began participation in a project.</p>	<p><i>Necessary to calculate and report on time spent participating in a project, and for accurate client counts at a point in time.</i></p>
	<p>Project Exit Date</p>	<p>The date a client ended participation in a project.</p>	
	<p>Housing Move-In Date</p>	<p>Documents the date that a household admitted into a Permanent Housing project actually moves into housing. Necessary to calculate length of time to housing. <i>Critical to point-in-time and housing inventory counts as it differentiates households that are enrolled but still literally homeless from those already moved into housing.</i></p>	
	<p>Prior Living Situation</p>	<p>To identify the type of living situation and length of time in that situation just prior to project start for all adults and heads of households. <i>Used with other information to identify if a client appears to meet the criteria for chronic homelessness at various points of enrollment.</i></p>	
	<p>Destination</p>	<p>Indicates where a client will stay immediately after exiting a project. <i>Critical for purposes of outcome measurement.</i></p>	
	<p>Relationship To Head of Household</p>	<p>Identifies one person to whom all other household members can be linked to at the time they enter a project. <i>Facilitates the identification of households and reporting on household composition.</i></p>	
	<p>Enrollment CoC</p>	<p>Links client data to the relevant CoC to ensure accurate counts of persons served.</p>	

3.2 ALASKA SPECIFIC DATA ELEMENTS

3.2.1 PURPOSE

The Alaska-Specific Data Elements (AKSDEs) described herein were designed by the two Alaska Continua of Care (AK CoCs) to collect information important to the community and to organizations that fund Alaska-specific community programs. The AKSDEs are required to be collected by all projects participating and entering data into the Alaska Homelessness Management Information Systems (AKHMIS). All AKSDEs are approved by the Alaska Balance of State Continuum of Care, the Anchorage Continuum of Care, and the AKHMIS Advisory Board prior to implementation.

3.2.2 COLLECTION

Regardless of the funding source, all projects participating in AKHMIS are required to collect the Alaska Specific Data Elements. These data elements should be collected upon client entry into a project and then updated as necessary to accurately reflect changes in a client’s situation.

	DATA ELEMENT	WHY WE COLLECT IT														
<p style="text-align: center;">ALASKA-SPECIFIC PROJECT STAY DATA</p> <p style="text-align: center;"><i>One or More Value(s) Per Project Stay for a Client</i></p> <p>Must be collected or reviewed/updated upon EVERY project stay.</p>	<p>Alaska Mental Health Trust Authority (AMHTA)-Specific Disabilities</p>	<p>To indicate clients' self-identification of one or more of five different mental health-related disabilities:</p> <ul style="list-style-type: none"> Alzheimer’s Disease and Related Dementias Chronic Alcoholism or Other Substance Use Disorder Intellectual or Developmental Disabilities Mental Illness Traumatic Brain Injuries <p>The Alaska Mental Health Trust Authority is a state corporation that administers the Alaska Mental Health Trust, a perpetual trust, to improve the lives of beneficiaries. <i>Collection of information related disabilities that the Trust funds is critical to preserve the availability of this funding stream.</i></p>														
	<p>Alaska Native Regional Corporation</p>	<p>To indicate clients' self-identification of affiliation with one of the 13 Alaska Native Regional Corporations:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Ahtna Corp.</td> <td style="width: 50%;">Cook Inlet Regional Corp.</td> </tr> <tr> <td>Aleut Corp.</td> <td>Doyon Limited Corp</td> </tr> <tr> <td>Arctic Slope Regional Corp.</td> <td>Koniag Incorp.</td> </tr> <tr> <td>Bering Straits Native Corp.</td> <td>NANA Regional Corp.</td> </tr> <tr> <td>Bristol Bay Native Corp.</td> <td>Sealaska</td> </tr> <tr> <td>Calista Corp.</td> <td>13th Regional Corp.</td> </tr> <tr> <td>Chugach Alaska Corp.</td> <td></td> </tr> </table> <p>These Native-owned corporations provide stewardship of ancestral lands and financial and other resources for Alaska's native people.</p> <p><i>Supports local system planning and understanding of who is experiencing homelessness and supports connection of clients to available resources</i></p>	Ahtna Corp.	Cook Inlet Regional Corp.	Aleut Corp.	Doyon Limited Corp	Arctic Slope Regional Corp.	Koniag Incorp.	Bering Straits Native Corp.	NANA Regional Corp.	Bristol Bay Native Corp.	Sealaska	Calista Corp.	13th Regional Corp.	Chugach Alaska Corp.	
	Ahtna Corp.	Cook Inlet Regional Corp.														
Aleut Corp.	Doyon Limited Corp															
Arctic Slope Regional Corp.	Koniag Incorp.															
Bering Straits Native Corp.	NANA Regional Corp.															
Bristol Bay Native Corp.	Sealaska															
Calista Corp.	13th Regional Corp.															
Chugach Alaska Corp.																
<p>Sexual/Relationship Orientation</p>	<p>To indicate client’s self-identified sexual orientation and optional additional sexual or relationship orientation data is collected for all adults and heads of households at project start, with two fields available for responses. See article Alaska Specific Data Element: Sexual Orientation & AK Sexual/Relationship Orientation (ASO).</p> <p><i>Supports local system planning and understanding of who is experiencing homelessness</i></p>															

3.3 PROGRAM SPECIFIC DATA ELEMENTS

3.3.1 PURPOSE

The Program Specific Data Elements (PSDEs) have been designed by HUD to allow projects that receive funding from any HMIS Federal partner, such as the U.S. Department of Health and Human Services (HHS) or the U.S. Department of Veterans Affairs (VA) to meet the statutory and regulatory data collection and reporting requirements of these programs. AKHMIS is required to provide for the collection of these data elements in support of these projects,

PSDEs, as defined by HUD, provide additional information about the characteristics of clients, the services they are provided, and program outcomes. Many of these data elements represent repeated transactions and were designed to collect information that may change over time.

3.3.2 COLLECTION

PSDEs may be collected at project start, update, annual assessment, project exit and/or at every event occurrence. Not all PSDEs are required for collection by all projects, and some AKHMIS-participating projects may only collect the UDEs and not collect any PSDEs at all. 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.

AKHMIS-participating organizations are responsible to know and collect the information required by their funders but are encouraged to actively work with the HMIS Lead Agency to ensure that they collect the information required by their funders at all appropriate event occurrences.

The table below provides the “Common Program Specific Data Elements”, which are the PSDEs that are collected across most Federal Partner programs. These Common PSDEs are listed along with their collection point within a client’s project stay:

Common PSDE	Collection Point				
	Project Start	Occurrence	Update	Annual Assessment	Project Exit
4.02 Income and Sources	X		X	X	X
4.03 Non-Cash Benefits	X		X	X	X
4.04 Health Insurance	X		X	X	X
4.05 Physical Disability	X		X		X
4.06 Developmental Disability	X		X		X
4.07 Chronic Health Condition	X		X		X
4.08 HIV/AIDS	X		X		X
4.09 Mental Health Disorder	X		X		X
4.10 Substance Use Disorder	X		X		X
4.11 Domestic Violence	X		X		
4.12 Current Living Situation		X			
4.13 Date of Engagement		X			
4.14 Bed-Night Date		X			
4.19 Coordinated Entry Assessment		X			
4.20 Coordinated Entry Event		X			

3.4 PROJECT DESCRIPTOR DATA ELEMENTS

3.4.1 PURPOSE

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

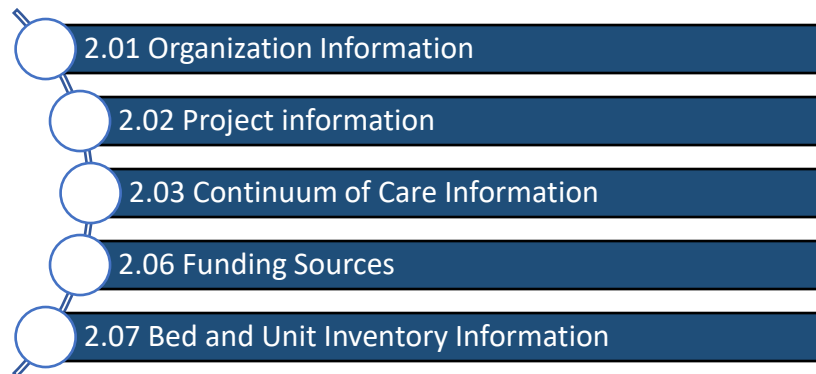
- Associate client-level records with the various projects in which clients will enroll in across project types;
- Identify which federal partner programs are providing funding to the project; and

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- Record bed and unit inventory and other information, by project, which is relevant for the Longitudinal System Analysis (LSA), System Performance Measures (SPMs), Housing Inventory Counts (HIC), Point In Time (PIT) counts, and bed utilization reporting.

3.4.2 COLLECTION

PDDEs are entered and managed by the HMIS Lead Agency in collaboration with each AKHMIS-participating organization, not AKHMIS end users. They are created at initial project setup within AKHMIS, and AKHMIS-participating organizations must work closely with the HMIS Lead Agency to review and provide updated information to the HMIS Lead Agency at least once annually. The required PDDEs are the following, with each comprised of multiple sub-elements of project information:

**4 DEFINING DATA QUALITY****4.1 FOUR COMPONENTS OF DATA QUALITY**

HUD identifies data quality as having four components: completeness, timeliness, accuracy, and consistency. These components are defined below, and further described later in this document.

Completeness	All clients entered in HMIS Complete identifying data entered in HMIS Complete characteristics fields entered in HMIS All services entered in HMIS Complete exit data entered in HMIS
Timeliness	Data are entered soon after collection Changing data are kept up to date
Accuracy	Truthfulness from clients Accurate data entered by staff

Consistency	Common interpretation of questions Common interpretation of client answers Common knowledge of what fields to answer
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USAGE OF CLIENT PREFERS NOT TO ANSWER AND CLIENT DOESN'T KNOW RESPONSE OPTIONS

Most required HMIS data elements provide for the options of “Client doesn’t know” or “Client prefers” to be recorded for the client’s response. 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, so a client may still be provided assistance. These are never to be used in place of asking a client for information, or in a situation where information was not collected. As described by the [FY2024 HMIS Data Standards](#) It is not the intention of HUD or the federal partners that clients be denied assistance if they prefer not to 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. The "Client doesn't know" or "Client prefers not to answer" responses should not be used to indicate that the case manager or data entry person does not know the client’s response. Nor are these responses to be assumed without first asking the client to provide the information. Some clients may decline to provide responses to some fields, 21 but case managers or data entry staff may not make that decision for them. At a national level, in every project type, most clients are willing to provide identifying information. If a project is experiencing a high rate of client refusals as compared to similar projects, CoCs should consider implementing training 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.”

MISSING DATA RESPONSES

“Missing data” is a category that represents all invalid and null responses to a required data element in AKHMIS. As described by the [FY 2024 HMIS Data Standards](#):

The HMIS Data Standards assume that fields for which data are not collected will be left blank (i.e., 'missing'). In situations where a system requires a response to all data fields before saving a record, the system must use a specific response category to indicate that data was not collected. In such cases, that response category must be treated as missing data for reporting purposes. “Data not collected” continues to be identified as a response option in these HMIS Data Standards. HMIS, which require entry of an element for the system to progress must implement the “Data not collected” response for all elements that require a response. “Data not collected” must equate to missing data or null values as appropriate for transfer and reporting purposes.

5 AKHMIS PROJECT DATA QUALITY STANDARDS

5.1 PURPOSE

The following data quality standards are the minimal standards to be met by all organizations entering data into AKHMIS. When data quality standards are met, reporting is more **dependable** and can be used to evaluate service delivery, project design and effectiveness, and efficiency of the system.

5.2 COMPLETENESS

"Are all of the required data elements for clients served recorded in AKHMIS?"

5.2.1 DEFINITION

Data Completeness is the percentage of data fields for any given client, project enrollment, provider, organization, 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."

Incomplete or missing data always consists of null and "data not collected" values, and may include "client doesn't know", "client refused", and/or "other" values for some data elements.

5.2.2 IMPORTANCE

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

5.2.3 STANDARDS/MINIMUM REQUIREMENTS

Data completeness is evaluated for the past 12 months to ensure organizations are completing records to the best of their ability, including updating records and entering in additional information that is gained as client interactions take place. The AK CoCs encourage all AKHMIS-participating organizations to aspire to 100% collection of all data elements (Universal, Alaskan, and Program Specific), but recognize that 100% data completeness may not be realistic or possible in all cases.

Ultimately, the encouragement to take ownership of quality data is organization-driven. Therefore, the AK CoCs have created minimum requirements for the past 12 months of project data completeness based on project type to accommodate all situations and ensure all HUD requirements are met, provided in the table below:

Project Type	Completeness Standard (% of Required Data Entered in AKHMIS)
Coordinated Entry	95% of required data elements (only applies after client reaches a specific point in the Coordinated Entry process)
Emergency Shelter – Entry/Exit or Night by Night	95% of required data elements, 25% of required destination data
Homelessness Prevention	95% of required data elements
Permanent Supportive Housing	98% of required data elements
Rapid Rehousing – Housing With or Without Services	98% of required data elements
Rapid Rehousing – Services Only	95% of required data elements
Street Outreach (Clients with a Date of Engagement only)	90% of required data elements (only applies after client has a Date of Engagement)
Supportive Services Only (Excludes Coordinated Entry)	95% of required data elements
Transitional Housing	95% of required data elements

5.3 TIMELINESS

“Is the required client information entered into AKHMIS within the required period of time?”

5.3.1 DEFINITION

Data timeliness is the length of time between when AKHMIS information is collected and when that information is entered into AKHMIS. Data timeliness cannot be edited and can only be improved going forward.

5.3.2 IMPORTANCE

Entering data into AKHMIS 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. Timely data entry also ensures that data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, or for responding to requests for information. Finally, 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.

5.3.3 STANDARDS/MINIMUM REQUIREMENTS

The AK CoCs encourage all AKHMIS-participating organizations to aspire to 100% of data being entered into AKHMIS in a timely manner. However, the AK CoCs recognize that this may not be realistic or even possible in all cases, and therefore have created the following minimum requirements for data timeliness based on project type and workflow:

Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in AKHMIS)
Coordinated Entry	Entry	Live time or within 5 days of contact
	Exit	Live time or within 5 days of contact (backdated to date of last contact)
Homelessness Prevention	Entry, Exit	Live time or within 5 days of contact
Emergency Shelter - Utilizing only an entry/exit workflow	Entry	Live time or within 5 days of shelter stay
	Exit	Live time or within 5 days of project exit (<i>backdated to date of last shelter night stay, the morning of the day the client did not return</i>)
Emergency Shelter - Utilizing shelter stay connected to an entry/exit workflow	Entry	Live time or within 5 days of shelter stay
	Exit	Live time or within 5 days of project exit (<i>backdated to date of last shelter night stay, the morning of the day the client did not return</i>)

Project Type	Client Event	Timeliness Standard (Length of Time to Data Entry in AKHMIS)
Emergency Shelter - Utilizing shelter stay disconnected from an entry/exit workflow	Shelter Stay	Live time or within 5 days of departure (<i>backdated to date of last shelter stay, the morning of the day the client did not return</i>)
	Entry	Live time or within 5 days of the client’s first shelter night stay
	Exit (formal project exit)	Live time or within 5 days of project exit
	Auto-Exit (no-contact exit)	After 14 days without a shelter stay, project exit needs to be recorded within 5 days (<i>backdated to date of last shelter night stay, the morning of the day the client did not return</i>)
Permanent Supportive Housing	Entry, Exit	Live time or within 5 days of contact
Rapid Rehousing – Services Only or Housing With or Without Services	Entry, Exit	Live time or within 5 days of contact
Street Outreach	Contacts, Entry	Live time or within 24 hours of contact
	Exit (formal project exit)	Live time or within 24 hours of project exit
	Auto-Exit (no-contact exit)	After 90 days of no contact, project exit needs to be recorded within 5 days (<i>back-dated to date of last contact</i>)
Supportive Services Only (excludes Coordinated Entry)	Entry, Exit	Live time or within 5 days of contact
Transitional Housing	Entry, Exit	Live time or within 5 days of contact

5.4 ACCURACY

“Does AKHMIS data accurately reflect true client information?” and “Are all of my clients in AKHMIS/In the correct project?”

5.4.1 DEFINITION/IMPORTANCE

Information entered in AKHMIS needs to accurately represent the clients who are served by any homeless service projects contributing data to AKHMIS. Inaccurate data, sometimes referred to as 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.

Data accuracy is not easy to manage or monitor and requires specific reports that look at congruency between and among responses to data elements within the system, as well as checks between what the client has told an intake worker and what data is entered into AKHMIS. Additionally, the Longitudinal System Analysis looks at specific data quality measures in a community-wide report submission to HUD on an annual basis.

DATA QUALITY PLAN

The AK CoCs, in partnership with the HMIS Lead Agency, work with projects to review, at regular intervals, the data collected directly from clients, and the data entered into AKHMIS to ensure that the data entered into AKHMIS matches the client's reality.

5.4.2 STANDARDS

External Record Standard: It is expected that 100% of client paper form data must match the client's AKHMIS data record, but a minimum of 98% is acceptable.

Quarterly Correction Standard: 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 by the AKHMIS is accurately reflecting the state of homelessness in Alaska.

Instead, timely corrections/updates to the following data elements, if and as necessary, are expected of all project types and all data entered into AKHMIS on a quarterly basis (as per the usual monitoring process):

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 (under X years of age)
Prior Living Situation and Dependencies are Congruent	3.917 Prior Living Situation	<i>Dependencies (Approx. Date, Time, and Months)</i> answered if 3.917/Length of Time indicate the client came from a homelessness situation
	Length of stay in prior living situation	
	On the Night Before	
	Approximate date this episode of homelessness started	
	Number times the client has been on the streets, in ES, or SH in the past three years including today	
	Number of homeless on the street, in ES or SH in the past three years	
Disabling Condition has a Source	3.08 Disabling Condition	If Yes to 3.08, then Yes to at least one 4.## and Yes to corresponding <i>Disabling? dependency</i>
	4.05 Physical Disability	If Yes to <i>Disabling? Dependency</i> for any 4.##, then Yes to the corresponding 4.##
	4.06 Developmental Disability	
	4.07 Chronic Health Condition	
	4.08 HIV/AIDS	
	4.09 Mental Health Disorder	
	4.10 Substance Use Disorder	
Monthly Income has a Source	4.02 Income	If Yes to 4.02, then Yes to at least one <i>source</i>
	Sources	If a <i>Source</i> is selected, then 4.02 must be Yes
	4.03 Non-Cash Benefits	If Yes to 4.03, then Yes to at least one <i>source</i>

Accuracy Measure	Data Element(s) Involved	Accuracy Test
Non-Cash Benefits has a Source	Sources	If a <i>Source</i> is selected, then to 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 <i>Source</i>
	Types	If a <i>Type</i> is selected, 4.04 must be Yes
Domestic Violence and Dependencies are congruent	4.11 Domestic Violence	If Yes to 4.11, <i>dependencies (When and Fleeing)</i> are answered; if No to 4.11, <i>dependencies</i> are not answered
	When experience occurred	If answered, 4.11 is Yes and other <i>dependency</i> is answered
	Are you currently fleeing	
Veterans are Not Minors	3.07 Veteran Status	3.07 is not Yes for clients under 18 years of age
	3.03 Date of Birth	
Enrollment CoC Appropriate to Project	3.16 Enrollment CoC	3.16 for a client enrollment matches 2.03 for the project
	2.02 Project Information	
	2.03 Continuum of Care Information	

Accuracy Measure	Data Element(s) Involved	Accuracy Test
Project funding sources match clients	2.02 Project Information	Specific to a Project – examples include: Age (Minor-/Youth-/Adult-only); Household (Singles-/Families-only); Gender (Single-Gender) Veteran (Veteran-dedicated); Disabling Condition Required
	2.06 Funding Sources	
	Clients in project	
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	

5.5 CONSISTENCY

“Are the required data elements being recorded in AKHMIS in a consistent manner across projects?”

5.5.1 DEFINITION/IMPORTANCE

Data consistency means that data is understood, collected, and entered in the same way across all projects in AKHMIS. Consistency directly affects the accuracy of data.

STANDARDS

Initial User Training Standard: All persons that enter data into AKHMIS at AKHMIS-participating organizations must first successfully complete initial training provided by ICA before they are allowed to access AKHMIS as AKHMIS end users. Additional training opportunities are available and readily offered by ICA to support AKHMIS end users that want more instructions or may need individual assistance to improve data quality. Training is also offered for intake workers who do not do data entry, to ensure they understand the purpose and importance of the information they are collecting and improve the accuracy of data entered into AKHMIS.

Monthly Activity User Standard: AKHMIS end users must enter data on a regular and consistent basis to maintain AKHMIS access to ensure they maintain familiarity with AKHMIS and the workflows for which they are responsible. It also reinforces and improves data timeliness and accuracy by preventing backlogs of data entry. Refer to the [AKHMIS Policies and Procedures Manual](#) for more specific requirements.

User Employment Standard: An organization must notify ICA via the Help Desk when any AKHMIS end user no longer requires access to AKHMIS or is no longer employed by the organization. Refer to the AKHMIS [Policies and Procedures Manual](#) for more specific requirements.

6 AKHMIS SYSTEM-WIDE DATA QUALITY STANDARDS

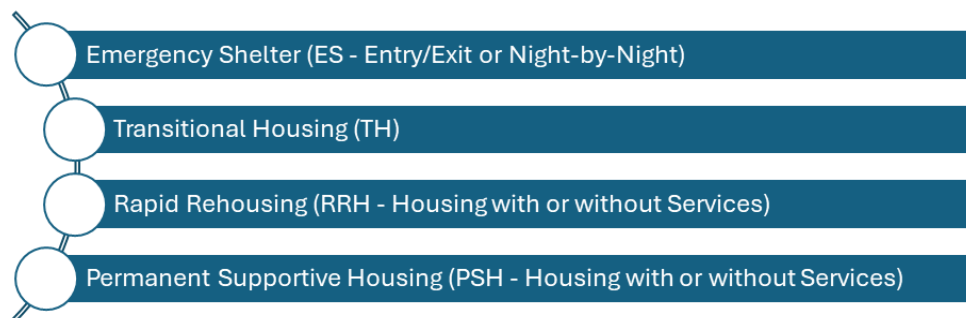
6.1 BED COVERAGE

“To what degree are the beds dedicated to serving clients at-risk of and experiencing homelessness entered into AKHMIS?”

6.1.1 DEFINITION

AKHMIS bed coverage is the number of homelessness services program beds in the AK CoC's geographic area that contribute data to AKHMIS.

The following HMIS Project Types contribute to bed coverage:



6.1.2 IMPORTANCE

The importance of a high percentage of AKHMIS Bed Coverage for all project types is an emphasis of the [HUD TA Data Strategy](#), as a lack of AKHMIS bed coverage prevents AK CoCs from truly understanding how both their system and the clients served within their system are functioning. Having a high bed coverage rate empowers a community to more confidently state that the information in AKHMIS accurately represents how the homeless response system is functioning for the persons at risk of or experiencing homelessness.

An HMIS must have an accurate record of Bed and Unit Inventory Information for all continuum residential projects. Bed and unit inventory records must be created at initial HMIS project set up and reviewed/updated no less than annually. [FY2024 HMIS Data Standards Manual](#)

6.1.3 STANDARDS

85% Coverage of Lodging Projects Standard: The AK CoCs will ensure that bed coverage is as close to 100% as is possible for applicable project types, and the AK CoCs will focus on project types with less than 85% bed coverage for improvement efforts.

As identified by HUD as in their [Sample Data Quality Plan](#), the following are things the AK CoCs and the HMIS Lead can do to ensure AKHMIS Bed Coverage reaches or maintains at 100%:

- Review the HIC on a quarterly or semi-annual basis to ensure all projects (with the exception of Victim Services Providers) are entering data into AKHMIS;
- If projects are included on the most recent HIC that do not enter data into AKHMIS, the AK CoC and HMIS Lead should find out why this is the case and target any solutions to the specific “why”;
- For any new project that becomes available within the AK CoC that will serve clients at-risk of or experiencing homelessness, the AK CoC should be made aware and work with the HMIS Lead to ensure the new project is encouraged and / or required to enter data into AKHMIS.
- The AK CoCs need to ensure that organizations providing services to those experiencing homelessness in their geographic area are aware of AKHMIS, understand the purpose of AKHMIS, and communicate back to the AK CoC all new projects or changes to existing projects that may affect HIC and/or AKHMIS participation.
- While inventory counts should be accurately recorded within the last week of each of the months of January, April, July, and October (to satisfy APR and LSA inventory accuracy), the CoC should attempt to backdate the date associated with the revised inventory to the actual date that the significant inventory change occurred. [FY2024 HMIS Data Standards Manual](#)

6.2 BED UTILIZATION

“To what degree are the beds in AKHMIS occupied by clients?”

6.2.1 DEFINITION/IMPORTANCE

Utilization is the number of beds that are filled by a client within a given period of time. Bed and unit utilization analysis is an effective way to determine whether the data in AKHMIS 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) or entering clients into the project in a timely manner (under-utilization).

6.2.2 STANDARDS

Between 65% and 105% Utilization Standard: Organizations are expected to have an 65-105% bed utilization rate for all lodging project types. There can be reasons why a bed utilization rate may be below 65% or above 105%. Low/High rates should be reviewed because they can point to data quality problems. Bed utilization rates for below 65% can be the result of:

- Not all clients participating in the project have been entered into HMIS and will make it appear that the project is underutilized and should be fixed.
- The project was genuinely under-utilized. Add a note to clarify any reasons why a project was under-utilized.

Bed utilization rates above 105% may be the result of:

- Clients have not been exited when leaving the project and this should be fixed.
- Overflow beds may have been used sporadically throughout the year to accommodate high-demand. Add a note to clarify any use of overflow bed.
- Project served more people than beds available. Add a note to clarify any reasons for high bed use.
- The number of reported beds available were less than the number of beds available. Add a note so that the bed inventory can be updated.

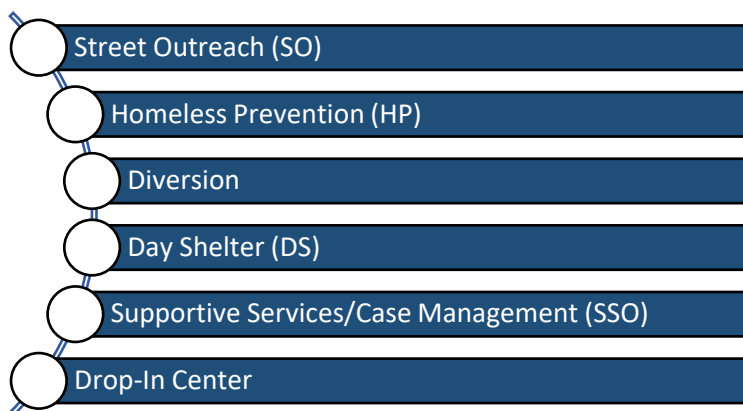
6.3 HOMELESS RESPONSE SYSTEM COVERAGE

“Are all of the clients we serve entered into AKHMIS?”

6.3.1 DEFINITION

The homeless response system includes other types of projects that provide homelessness services but do not provide lodging to clients. If any service project types are dedicated and/or prioritized to serve clients at-risk of or experiencing homelessness in the community, the goal is for the data to be entered into AKHMIS for clients served.

The following types of projects that do not have beds/units associated:



6.3.2 IMPORTANCE

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

6.3.3 STANDARDS

System Coverage Standard: The AK CoCs will work to ensure that system coverage is as close to 100% as possible for all project types.

7 DATA QUALITY MONITORING

AKHMIS data will be monitored regularly at the user-, project-, organization-, and system-levels to ensure that the above Data Quality Standards are met by all AKHMIS-participating organizations.

7.1 PURPOSE

The goal of ongoing AKHMIS data quality monitoring is to ensure organizations maintain a high level of data quality at all times to support accurate reporting and system analysis, and to minimize data clean-up. Consistent engagement by providers ensures accurate reporting and minimizes the potential for negative impact on system-wide federal reports.

7.2 GENERAL PROCESS

A current copy of this AKHMIS Data Quality Plan will be posted to [ICA's website](#) to ensure that AKHMIS-participating organizations are aware of the minimum data entry standards they are required to meet. AKHMIS-participating organizations are expected to regularly generate and review data quality reports to ensure they are aware of any data quality issues. They are also expected to address any issues quickly and make all necessary corrections within a reasonable amount of time. Completing this process regularly minimizes the burden of data quality maintenance on organizations.

The AK CoCs will work with ICA to monitor data quality, and AKHMIS-participating organizations with data quality not meeting the standards outlined in this plan may receive reports from ICA to notify them of inaccuracies and the methods by which to correct them. Organizations that consistently do not meet the minimum data entry standards set forth herein will be asked by the AK CoC to work with them and ICA to improve and meet the standards moving forward (for further information see [8.3 Data Quality Improvement Plan](#)).

2023 Suggested Focus Areas:

- Move monthly reporting to quarterly for ES, HP, RRR, SO, SSO unless a decline in data quality is found.
- PH, TH submit their quarterly report to CoC / HMIS Lead Agency for review
- Providers submit lists of clients active in period report that we compare to our records – Monthly PITs?

- Providers submit their data quality reports

7.3 SYSTEMWIDE MONITORING

7.3.1 BED COVERAGE & SYSTEM COVERAGE

The AK CoCs will review and update **their respective CoCs' Inventory Use and Availability Report on a quarterly or semi-annual basis** to know which projects participated in the most recent Annual Housing Inventory Count (HIC) but are not entering data into AKHMIS (excluding Victim Services Projects).

Ensuring an AK CoC's AKHMIS Coverage reaches 100%, and stays at 100%, requires implementing a process to ensure that any new projects that become available to serve clients at-risk of or experiencing homelessness are communicated to the AK CoC so that AKHMIS data entry is encouraged and/or required for the new project.

The AK CoCs will work with the strategies below with the goal of increasing AKHMIS Bed and Response System coverage to 100%:

Strategies to Increase and/or Maintain HMIS Bed Coverage
The AK CoC ensures that all new projects that become available within the AK CoC that serve clients at-risk of or experiencing homelessness, are encouraged, and/or required to enter data into AKHMIS.
Provide a streamlined, simple process for new organizations and/or projects to communicate to the AK CoC about new projects operating within the community.
Work with state and local funders to understand the importance of AKHMIS and encourage all funders to require the use of AKHMIS for grantees.

7.3.2 BED UTILIZATION

ICA will calculate and review bed utilization data and provide that information to AKHMIS-participating organizations along with use and availability information. Each AKHMIS-participating organization will regularly generate and review an Inventory Use and Availability Report for their projects. If the utilization is not correct, the organization will make necessary corrections to ensure that all clients who were served in the time period are entered into the project and that all clients who were exited in the time period are exited from the project.

The HMIS Lead Agency will also review bed utilization regularly with the AK CoCs.

Report Title in SAP BusinessObjects	Answers the Question	Report Period	Frequency	Project Type
Bed Coverage HIC (submitted by Participating Providers)	How many beds are available for persons experiencing homelessness in participating projects?	Prior 3 months	Quarterly	ES, RRH, TH, PH
Bed Coverage PIT/HIC - (submitted by Participating and Non-Participating Providers)	How many beds are available for persons experiencing homelessness in participating and nonparticipating projects?	Point-In-Time Count date	Once a year	ES, RRH, TH, PH

7.4 PROJECT-LEVEL MONITORING

7.4.1 AKHMIS-PARTICIPATING ORGANIZATION DUTIES

AKHMIS-participating organizations will submit a Data Quality Performance Scorecard (DQPS) to ICA every quarter in a timely manner. The report period will be the previous 12 complete months and the scope will be all projects within an AKHMIS-participating organization that were operating and entering data into AKHMIS during the report period.

If an AKHMIS-participating organization has a project that does not meet data quality standards for two or more quarters in a row, ICA will inform the organization's AK CoC and the organization will provide explanation and/or work with ICA to correct data within an agreed-upon timeframe. Additional terms may be added at the discretion of the organization's AK CoC and are subject to change at any time upon approval by the organization's AK CoC.

AKHMIS-participating organizations will review and confirm utilization data with ICA every quarter in a timely manner. AKHMIS-participating organizations will provide explanations to verify any utilization rates under 65% or over 100%, and this information will be shared with the organization's AK CoC.

If an AKHMIS-participating organization has a project with incorrect utilization rates or cannot provide a valid explanation for utilization under 65% or over 100%, the organization will work with ICA to correct data within an agreed-upon timeframe.

For persistent data quality issues, projects may be contacted by the AK CoC to discuss the implementation of a Data Quality Improvement Plan (DQIP) (see 8.3 [Data Quality Improvement Plan](#)).

7.4.2 ICA DUTIES

ICA will create and maintain a Data Quality Performance Scorecard (DQPS) monitoring report for use in data quality monitoring. ICA will calculate utilization data (bed/unit inventory use and availability) and provide this information to AKHMIS-participating organizations for review every quarter. ICA will ensure additional reports are available to AKHMIS-participating organizations to self-monitor data quality and identify where improvements are needed to help them meet the Standards for Completeness, Timeliness and Accuracy. [Data Quality: An Overview of the Data Quality and Completeness Reports for AKHMIS](#)

ICA will ensure additional training resources and opportunities are available to AKHMIS-participating organizations to support improving data quality. ICA will provide the AK CoCs with a semi-annual summary report of the above data quality information.

7.4.3 AK COCS

The AK CoCs will review all summary reports and work with AKHMIS-participating organizations and ICA to ensure all AKHMIS-participating organizations achieve a high level of data quality within AKHMIS.

8 DATA QUALITY IMPROVEMENT

The AK CoCs will work with ICA to ensure AKHMIS-participating organizations have the support and tools they need to achieve a high level of data quality within AKHMIS. The following processes are designed to demonstrate the importance of data quality within AKHMIS and encourage its prioritization within an AKHMIS-participating organization's daily functions.

8.1 INCENTIVES

Organizations that consistently make timely corrections to their data will minimize their workload going forward. Additionally, they will improve their funding outlook with complete and accurate data to provide to possible funders to prove their need.

DATA QUALITY PLAN

AKHMIS-participating organizations who consistently meet data quality standards or make significant improvements are publicly acknowledged at least every quarter.

AK CoC Board	The AK CoC Boards make data quality a standing agenda item at Board meetings, and publicly acknowledge AKHMIS-participating organizations meeting data quality standards.
AK CoC General Membership	The AK CoCs acknowledge the work of AKHMIS-participating organizations meeting data quality standards and/or making improvements to data quality at the AK CoCs' General Membership Meetings, via the AK CoC e-newsletter, and/or other public forums.
AK CoC Rank & Review Process	The AK CoCs use data quality metrics to evaluate AKHMIS-participating organizations during the rank and review process

8.2 CONTINUOUS DATA QUALITY IMPROVEMENT PROCESS

An AKHMIS-participating organization with an identified data quality improvement opportunity is permitted a minimum of one month to correct their data or processes. The AKHMIS-participating organization's AK CoC and ICA may offer additional support and/or training to the AKHMIS-participating organization until it can effectively demonstrate an ability to meet minimum data entry standards. Successful ability to meet data quality standards is determined at the discretion of the AKHMIS-participating organization's AK CoC.

8.3 DATA QUALITY IMPROVEMENT PLAN

A Data Quality Improvement Plan (DQIP) is a detailed work plan intended to support and enhance an AKHMIS-participating organization's data quality in a specific area. A DQIP is a collaborative effort between an AKHMIS-participating organization, the AKHMIS-participating organization's AK CoC, and ICA. A DQIP will not be initiated without an AKHMIS-participating organization's AK CoC approval, and all parties will contribute to the creation of the DQIP.

The AK CoC and ICA will support the provider with resources and training to ensure the goals and objectives in the DQIP are successfully achieved, and the AKHMIS-participating organization will engage with the AK CoC and ICA to complete the work plan.

AKHMIS-participating organizations, the AK CoCs, and ICA would develop Improvement plans together for those projects which are not meeting the standards outlined in the Data Quality Plan.

Organization, CoC, and the HMIS Lead Agency would develop Improvement plans together for those projects which are not meeting the standards outlined in the Data Quality Plan.

2023 Suggested Focus Areas:

- Plan for working with Street Outreach to determine best tools for timely exits – affects BfZ
- Plan for working with Shelters on overlaps
- Focus on timeliness of data entry
- More formal Data Quality Improvement process
- More education

8.3.1 INITIATION

A Data Quality Improvement Plan may be advised when a monitoring event documents one or more persistent (does not improve with time) or pervasive (widespread or drastic) improvement opportunities related to data quality within a AKHMIS-participating organizations.

8.3.2 COMPONENTS

An effective Quality Improvement Plan includes a description of the following elements:

Improvement Objectives

- Measurable goals

Activities (to meet objectives and goals)

- Training and support activities that need to be developed or improved
- Timeline for all activities, including DQIP start and end dates
- Responsible parties
- Assessment/measurement methods for progress

Monitoring Plan

- Monitoring activities
- Monitoring benchmarks/dates

Communication Plan

- Communication of DQIP activities to the organization's users
- Progress reports from the organization to relevant stakeholders
- Progress reports to the CoC

Evaluation Plan (to determine effectiveness)

- A date for final evaluation
- Thresholds for plan extension and continued monitoring or plan expiration

8.3.3 EVALUATION

Upon final evaluation of the Data Quality Improvement Plan, the appropriate process from the options below will take place:

1. If minimum standards are met: the DQIP will be concluded, and regular monitoring will resume.
2. If minimum standards are not met but improvement and active engagement has been demonstrated: the DQIP may be concluded, and regular monitoring will resume, or the DQIP may be extended upon collaborative decision between the AK CoC, the AKHMIS-participating organization, and ICA.
3. If minimum standards are not met and no improvement or active engagement has been demonstrated: AKHMIS-participating organization's AK CoC will review the situation and engage the AKHMIS-participating organization and ICA in communication regarding next steps.

At the discretion of the AKHMIS-participating organization's AK CoC, an AKHMIS-participating organization that fails to meet standards and fails to engage in a DQIP may have their AKHMIS access suspended to preserve the integrity of other data in AKHMIS. Suspension will be a last resort and will not occur without all other options being considered nor without extensive communication between the AK CoC, the AKHMIS Advisory Board, the AKHMIS-participating organization, and ICA.

See [Appendix A](#) for a sample DQIP template.

8.4 AKHMIS ANNUAL MONITORING

The AK CoCs and ICA will use a standard AKHMIS Annual Monitoring Tool to evaluate every AKHMIS-participating organization entering data into AKHMIS on compliance with this AKHMIS Data Quality Plan, AKHMIS Policies and Procedures, AKHMIS-participating organization agreements, user agreements, and any other documents governing the use of AKHMIS. At a minimum, evaluation will occur annually.

The AK CoCs and ICA will work with each AKHMIS-participating organizations to ensure that the data collected from clients matches that being entered into AKHMIS. If any data quality improvement opportunities are identified during evaluation, a Data Quality Improvement Plan may be advised to address improvement opportunities using concrete, time-bound action steps.

2023 Suggested Focus Areas:

- Desk audits followed up by onsite visits – like AHFC process.
- Start on-site monitoring?
- Move to working closely with Data Committee to look at trends.

8.5 NEW PROJECT MONITORING

New organizations, new projects, and new end users will be monitored for data quality in AKHMIS, and all monitoring results will be discussed directly with them. See [Appendix B](#) for AKHMIS Annual Monitoring Tool.

9 APPENDICES

- A. [Data Quality Improvement Plan](#)
- B. [AKHMIS Annual Monitoring Tool](#)
- C. [Standards Reference](#)

DATA QUALITY PLAN

<i>Issue</i>	<i>Baseline Not Currently Being Met</i>	<i>How to Address</i>	<i>How Often and who is responsible</i>	<i>Target Date</i>	<i>Progress Notes</i>	<i>Date Completed</i>

Additional Narrative:

Acknowledgement and Acceptance of Data Quality Improvement Plan

Program Manager/Organization Executive Director

Date

HMIS Lead Agency Manager/Director

Date

AK CoC Manager/Director

Date

9.2 APPENDIX B: AKHMIS ANNUAL MONITORING TOOL

ORGANIZATION PRIVACY & SECURITY VERIFICATIONS

Privacy Procedural	Yes	No	N/A
The Consumer Notice is displayed in a public location and is explained to clients upon intake, and extra copies of the AKHMIS Consumer Notice, Privacy Policy, AKHMIS Policies and Procedures, and Organization Privacy and Security Policies and Procedures are available for clients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clients are provided an opportunity to ask questions about the Consumer Notice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All AKHMIS data in hard-copy and all signed forms are stored in a secure location (protected from public/ unauthorized access).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workstations are located in a non-public location OR monitored to prevent public/unauthorized access and screens face away from public view.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AKHMIS End user credentials (Passwords and Usernames) are not being shared between AKHMIS End users, and not written down in plain view or saved within browser (login-required password managers are allowed).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Data Security	Yes	No	N/A
A secure internet connection is used to access the AKHMIS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A firewall is installed, active, and automatically updated (or updated regularly) on each workstation computer OR on the network.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All workstation computers have updated operating systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatically updating antivirus software is Installed and active on all workstation computers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All workstation computers use an updated browser to access the AKHMIS (that is NOT Internet Explorer).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All workstations have an automatic, password-protected screensaver that activates after 5 minutes (or less) of inactivity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
** Unauthorized access to devices is restricted by turning off File Sharing and Network Discovery (recommendation only; not required).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If devices are used in the field they are encrypted upon lock-out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compliance	Yes	No	N/A
The Organization has a Client Grievance Policy and Procedure allowing clients to submit comments regarding AKHMIS data privacy and security.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Organization ensures the AKHMIS is only accessed and used by persons with current, signed User Agreements with their own personal AKHMIS license.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Organization has a current, executed AKHMIS Participation Agreement on file with HMIS Lead Agency and if applicable, a signed or executed Interorganizational Data Sharing and Coordinated Services Agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Organization follows Security and Privacy Policies and Procedures for AKHMIS data that are compliant with AKHMIS requirements (e.g., addressing management, handling, storage, communication, and disposal of hard-copy and/or electronic Personal Protected Information (PPI)).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Organization regularly monitors itself for compliance with Organization and AK CoCs privacy and security policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current AKHMIS data elements are being collected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Organization notifies HMIS Lead Agency when any AKHMIS End User is no longer employed at the Organization or and/or no longer needs access to the AKHMIS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project Type Specific Procedures	Yes	No	N/A
Supportive Service Only Projects, including Day Shelter and Outreach Projects: Staff know and are following the Organization and AK CoC Discharge Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RHY Projects: Contact Logs are being created and follow ups being recorded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Project: Outreach contacts are being recorded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DATA QUALITY PLAN

PROJECT VERIFICATIONS

Duplicate this section for each project.

Project Name: _____ **Funding Source(s):** _____

INVENTORY

Bed Type	Number of Beds
Chronically Homeless Veterans	
Youth Veterans	
Other Veterans	
Chronically Homeless Youth	
Other Youth	

Bed Type	Number of Beds
Any Other Chronically Homeless	
Non-Dedicated Beds	
Total Bed Inventory	
Total Unit Inventory	

DATA QUALITY CHECK

Standard	Yes	No	N/A
Project intake forms includes all data elements required by project type?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are entries and contacts being recorded within the timeliness standards in the Data Quality Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are exits being recorded within the timeliness standards in the Data Quality Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project is meeting completeness standards for UDEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project is meeting completeness standards for Destinations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project is meeting completeness standards for Prior Living Situations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project is meeting completeness standards for AK-specific DEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project is meeting completeness standards for Program-Specific DEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AK CoC-funded Only: Project is meeting completeness standards for Annual updates?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supportive Services Only: Clients being exited/discharged appropriately?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outreach Only: Contact are being recorded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is Bed and Unit Inventory current in AKHMIS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are Data Accuracy measures being updated/addressed as necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all active AKHMIS End users entering data on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Follow-Up Notes:

Completed By: _____ Date Completed: _____

9.3 APPENDIX C: STANDARDS REFERENCE

Links to standards:

[Data Completeness](#)

[Data Timeliness](#)

[Data Accuracy](#)

[Consistency](#)

[Bed Coverage](#)

[Bed Utilization](#)