

# Manual of Data Management for the Springfield/Chicopee/ Holyoke/Westfield/ Hampden County Continuum of Care



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## City of Springfield Office of Housing

This manual contains background information on Data mapping, data quality control, and reporting for the Springfield/Chicopee/Holyoke/Westfield/Hampden County Continuum of Care. Its purpose is to serve as a guide for both Continuum of Care staff and participating agencies to outline data and reporting expectations. It also provides specific guidelines on where to enter and retrieve data from the City of Springfield's "Efforts to Outcomes (ETO)" Database.

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## BACKGROUND

### INTRODUCTION TO THE MANUAL

The following manual outlines the evaluation and monitoring system for the Springfield/Chicopee/Holyoke/Westfield/Hampden County Continuum of Care. The City of Springfield is the lead agency for this Homeless Management and Information System (HMIS). The manual contains the following information:

1. What information will be captured and why it was chosen
2. How the information will be captured:
  - When it will be captured,
  - Who will capture it, and
  - Where it will be recorded.
3. How the City of Springfield will ensure that the data is accurate, and
4. How the City of Springfield intends to use the data to inform its programs and future direction.

The manual serves as a summary of a seven month process conducted from 2009-2010, and has been updated in January 2013. The initial process involved staff from the City of Springfield with input from representatives of participating community agencies. It was coordinated by the HMIS Administrator and an outside consultant.

The manual is intended to be utilized as a practical guide and reference for staff from the City of Springfield and community agencies receiving funding from one or more of the following federal and/or state sources: Continuum of Care Program, ESG or HOPWA. As such, it is a living document which will be updated and changed as the organization grows and learns from its data.

### THE CONTINUUM OF CARE

The Continuum of Care Program has been established by the United States Congress to:

1. Promote communitywide commitment to the goal of ending homelessness;
2. Provide funding for efforts to quickly rehouse homeless individuals (including unaccompanied youth) and families, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;
3. Promote access to and effective utilization of mainstream programs by homeless individuals and families; and
4. Optimize self-sufficiency among individuals and families experiencing homelessness.

A local Continuum of Care is made up of representatives from relevant organizations within a geographic area, including nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals.

The Continuum of Care undertakes planning for and implementation of a housing and service system within its geographic area that meets the needs of homeless individuals (including unaccompanied youth) and families. The planning activities conducted by the CoC include an annual point-in-time count of homeless persons within the

geographic area; a gaps analysis of the homeless needs and services; providing information needed for the Consolidated Planning process to municipal jurisdictions with its geographic area; and consulting with state and local government Emergency Solutions Grant (ESG) recipients regarding use of these funds and reporting on and evaluating performance of ESG programs. The CoC annually coordinates the application of member agencies to HUD for funds to carry out the planned housing and services system, and it responsible for reporting on and evaluating performance of the funded programs. The CoC also reports annually to HUD on the overall performance of the CoC system.

The CoC Program was initiated in 1994, and, at that time, the City of Springfield geographic area organized into a CoC. In 2012, the CoC that covered the other cities and counties of Hampden County dissolved, and the Springfield CoC absorbed this geography and became the Springfield/Chicopee/Holyoke/Westfield/ Hampden County Continuum of Care.

The City of Springfield is the lead entity and collaborative applicant for the CoC. As collaborative applicant, the applies for HUD grant funds in the Continuum of Care Competition, is awarded grant funds, and establishes subrecipient agreements with the entities that carry out the programs funded.

Commencing in 2004, HUD has required recipients of Continuum of Care Program funds to collect electronic data on their homeless clients in HMIS. The purpose of HMIS is to record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services and about persons who receive assistance for persons at risk of homelessness over time, to produce an unduplicated count of homeless persons for each Continuum of Care; to understand the extent and nature of homelessness locally, regionally and nationally; and to understand patterns of service use and measure the effectiveness of programs.

Information generated from the HMIS is used by recipients and subrecipients to report to HUD; is used by HUD and other Federal agencies to report to Congress and to evaluate recipient performance; and may be made available to the public to raise awareness and enhance local planning processes.

HUD requires that every Continuum of Care have an HMIS that is operated in compliance with the requirements of 24 CFR 580. All recipients of grants from the programs authorized by Title IV of the McKinney-Vento Act (the CoC and ESG programs) are required to use HMIS, except for victim service providers, who are not permitted to enter data into HMIS, and legal service providers who may choose not to use HMIS if it is necessary to protect attorney-client privilege. Homeless and nonhomeless projects that are not funded by grants from programs authorized by Title IV of the McKinney-Vento Act may participate in the local HMIS, and must follow all of the requirements set forth in 24 CFR 580.

The City of Springfield is the CoC's lead HMIS entity and operates the HMIS.

## DESCRIPTION OF VENDOR, SOCIAL SOLUTIONS

Social Solutions was founded in 2000 by human service professionals, and has been the leading provider of performance management software ever since.

The City of Springfield uses ETO (Efforts to Outcomes) software created by Social Solutions. Each community agency participating in homeless services sponsored by the city has its own site on the software and can program the software to meet its individual needs.

ETO meets all HIPPA standards for security, privacy and confidentiality.

## OVERSIGHT OF DATA MANAGEMENT AND COLLECTION

### STAFFING

Oversight for the HMIS database is the responsibility of the City of Springfield. The City has allocated a HMIS Administrator (1.0 FTE) to both assure the quality of data entered in the database and general usage by all programs receiving funding through the City of Springfield. This individual is also responsible for structural changes to the database to capture information and for developing necessary reports.

The HMIS Administrator reports to the Director of the Office of Housing for the City of Springfield who is responsible for approving all policy decisions.

### OVERSIGHT COMMITTEES

The CoC oversight committee meets once a month. Their primary responsibility is to discuss homelessness policies and joint responses to homelessness for the CoC. This group also discusses any policy changes from HUD or other funding entities, determining the best way to implement these changes in the CoC.

A smaller subcommittee was formed from the CoC oversight committee devoted to oversight of the database management. Each CoC-funded organization is responsible for sending one representative. Additional representatives come from ESG and HOPWA funded agencies. Representatives to the database oversight committee are managers responsible for the CoC, ESG, or HOPWA programs or staff members primarily responsible for internal data management. This committee discusses data management policies, provides advice for structural changes to the database, and surfaces data quality issues or obstacles.

### COLLECTION OF DATA

Agencies that receive funding under the CoC program, ESG and HOPWA are required to contribute data on funded programs to HMIS. These agencies and other agencies not funded under these programs are encouraged to contribute data about people experiencing homelessness to HMIS. Data may be contributed in one of two ways:

1. Contribute directly to the City's HMIS. Agencies that contribute directly are provided web-based log-in information with which to access the system.
2. Contribute data to the Commonwealth of Massachusetts ASIST program and sign a data-syncing agreement enabling the City HMIS and ASIST to share data.

## OVERVIEW OF FUNDED PROGRAMS

This section provides an overview of the various programs funded through the City of Springfield whose data are captured in the HMIS database.

### CONTINUUM OF CARE PROGRAM

The Continuum of Care Programs have formed the backbone of local efforts intended to address the needs of homeless individuals and families, including the creation of new supportive housing. In 1994, HUD introduced the Continuum of Care model to encourage communities to address the problem of homelessness in a more coordinated, comprehensive, and strategic fashion. With the introduction of Continuum of Care planning, communities were encouraged to envision, organize, and plan comprehensive, long-term solutions to address the problem of homelessness.

HUD's Continuum of Care Programs components are Permanent Housing (PH)—including Permanent Supportive Housing for Persons with Disabilities (PSH) and Rapid Rehousing (RR)—, Transitional Housing (TH), Supportive Services Only (SSO), HMIS and, for some CoCs that have received approval from HUD, homelessness prevention.

### ESG

The Emergency Solutions Grants program

### HOPWA

HOPWA funding provides housing assistance and related supportive services, and grantees are encouraged to develop community-wide strategies and form partnerships with area nonprofit organizations. HOPWA funds may be used for a wide range of housing, social services, program planning, and development costs. These include, but are not limited to, the acquisition, rehabilitation, or new construction of housing units; costs for facility operations; rental assistance; and short-term payments to prevent homelessness. HOPWA funds also may be used for health care and mental health services, chemical dependency treatment, nutritional services, case management, assistance with daily living, and other supportive services. ([www.hud.gov](http://www.hud.gov))

The City of Springfield administers HOPWA grants for a regional area that includes Hampden, Hampshire and Franklin Counties.

## RECORDING DATA

The following section provides information on recording data in the City of Springfield database for each of the funded programs.

### HOW TO ENTER A PARTICIPANT (BASIC DEMOGRAPHIC INFORMATION)

Adding **new** participants/households into ETO (Basic Demographic Information)

Prior to adding a new participant/households into a program you should first check to be sure that participant/household is not already in data base and that the data will be entered into the correct program (name of program is located at the top of screen on left hand side).

**To add single participant into data base:**

Demographics are facts about participants that do not change.

1. Go to Navigation bar on the right side of your screen
2. Click Participants
3. Add New Participants

EXAMPLE: Navigation>Participants>Find Participants>Add New Participants

**To add a household/family into the data base:**

1. Navigation Bar
2. Participants
3. Add/New Household

EXAMPLE: Navigation>Participants>Add New Household

When choosing a family name you should make this name unique and easy to identify the family you want to work with especially in cases where the surname/last name is common such as Johnson, Smith, Rivera or Cruz.

Example: Linda K. Johnson Family; Johnson Family 1/29/1961 (Head of households date of birth) L K Johnson Family 1961 (last four digit of Head of households SSN#)

Once all family members have been entered into the data base, you will then need to do a **required** intake assessment on all family members.

An Effort/Point of Service is required to be done on the Head of Household.

**Entering members to an existing family/household in data base**

Navigation Bar> Participants> Add/Edit Families

1. Enter in Family Name or (partial) Family Member Last Name then click search
2. Click on "Work with Family"
3. Input family member data
4. Save
5. Do intake assessment on all new family members.

## ASSESSMENTS

Assessments are used as a continuation of demographics that can be/will change over a period of time. Assessments are used to capture pre/post test responses to track the progress and impact of services and are typically taken at specific points in time.

There are three types of assessments that are required by HUD

1. **Intake:** taken at time of enrollment
2. **Mid Program:** taken when participant/household is enrolled in program for more than 12 months consecutively and should be taken mid way through program.
3. **Exit:** taken when participant has completed program and/or at time of dismissal from program.

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### INTAKE ASSESSMENTS

Intake Assessment at program enrollment: once enrollment is complete you will be prompted to do intake assessment

If Assessment is done at later date:

**(Intake Assessment date must be the same date as enrollment date)**

EXAMPLE: Navigation Bar>Participant History>Participant Assessment

Enter surname/last name of participant/family and click search:

Fill in the assessment making sure that all required fields (in yellow) are answered. When moving through the assessment you may click on the tab (located near bottom of page)

or you may use the tabs at top of page (Universal Information; Disability Information; Education, Employment and Income) to go from one section to next

Once assessment is taken scroll to bottom of page, in lower left hand and click **submit**.

Page will not refresh if date of assessment is blank (this is found at top of the page) **date must the same date as date of enrollment.**

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### MID-PROGRAM ASSESSMENT

HUD Mid-Program Assessment: This assessment must be taken within 6 months of program enrollment if participants/families are going to be enrolled in program longer than one year.

To access Mid-Program Assessments you may enter in surname of participants/families in search box located on home page of program (check upper left of home page to ensure that you are in the correct program).then click search

1. Enter surname into box labeled (Enter Search Terms(s) then click Search
2. Click on participant/family name; a dialog box will open, click on Participants name Dashboard NEW.
3. Participant's/Household's Dashboard will open. All information pertaining to Participants/Households is accessible from here.
4. In box labeled Recent Assessments you would click Add New

When entering a Mid-Program Assessment, you may choose to auto populate the information initially taken at time of enrollment from Intake Assessment. (To auto populate you must click on tab at top of page: Populate with previous assessment data)

If any information has changed you may then edit this assessment to reflect the changes.

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## EXIT ASSESSMENT

**All** participants/families must have an exit assessment prior to being dismissed from program.

To access Exit Assessments you may enter in surname of participants/families in search box located on home page of program (check upper left of home page to ensure that you are in the correct program).

1. Enter surname into box labeled (Enter Search Terms(s) then click Search
2. Click on participant/family name a dialog box will open, click on Participant name Dashboard NEW.
3. Participants/Household Dashboard will open. All information pertaining to Participants/Households is accessible from here.
4. In box labeled Recent Assessments click on Add New

When entering an Exit Assessment, you may choose to auto populate the information initially taken at time of enrollment from Intake Assessment. (To auto populate you must click on tab at top of page: Populate with previous assessment data)

You may edit this assessment to reflect any changes.

### **Dismissing Participants/Households**

**All** Participants/Households must be dismissed from program once an exit assessment is completed.

To dismiss a participant/household:

Enter in surname of participants/families in search box located on home page of program (check upper left of home page to ensure that you are in the correct program).

1. Enter surname into box labeled (Enter Search Terms(s) then click Search
2. Click on participant/family name; a dialog box will open, click on Participant name Dashboard NEW. This will show all of the information on participant/family.

3. In box labeled **Action Links** (has an icon of paperclip) click on Dismiss Participants;
4. Enter in dismissal date, select reason for dismissal if prompted, check off Successfully completed is participants/household successfully completed program
5. Click on Dismiss button. Participant/Household has successfully been exited and dismissed from program.

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## USING THE BED REGISTER

### Shelter Check – In

This feature is used primarily by staff working with emergency shelters, making it easy for staff to add a participant on the spot. If the participant does not exist in ETOa participant record is created on that page, with only first and last name. The participant is flagged as new until the View/Edit Participant page is updated.

Navigation> Record Efforts>Housing Check In Beta

1. Click on Add Participant to Bed
  - a. Last name, First name
  - b. Dialog box will expand choose Add Participant

(If participant does not exist in ETO participant will be flagged NEW until View/Edit Participant page is updated)

Navigation> Find Participant

1. Type in Last name of participant
2. Click on Participant's name
3. Click on View Name of Participant's Dashboard
4. Under Action Links (Picture a chain link)
5. Click View/Edit Participant Page
6. Submit
7. Click on Participant's Dashboard
8. Under Action Links
9. Click Participants Assessments
10. Complete Intake assessment on participant
11. Submit Assessment

You may now add a new participant to bed registry.

### Shelter Check - Out

Navigation> Record Efforts> Shelter Check Out

You may select all to check on default date, or you may check out participants individually by selecting a date and then checking box next to Participants Name.

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## RECORD SERVICES

Both the CoC Program and ESG require participating agencies to record services rendered. An explanation of where to track services for both of these programs appears below.

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## CONTINUUM OF CARE

The Continuum of Care Program tracks types of services (Q 15) for the APR. This information is recorded under “record services / participant.”

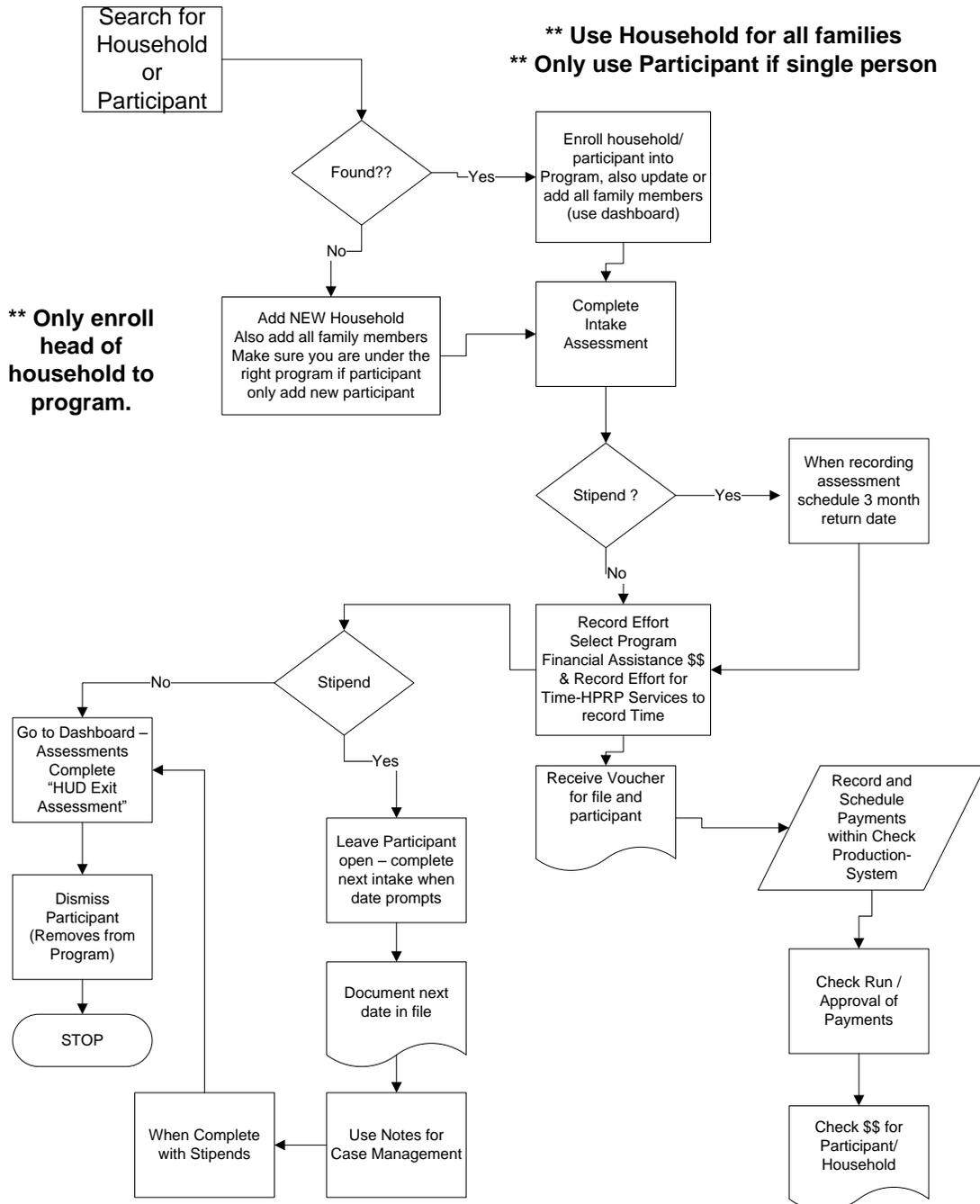
1. Enter surname into box labeled (Enter Search Terms(s) then click Search
2. Click on participant dashboard.
3. In box labeled **Action Links** (has an icon of paperclip) click on Participant Efforts;
4. Click on HUD Services Provided.
5. Fill in all required information and save effort and close.

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## ESG PREVENTION AND RAPID REHOUSING

It is important to track both ESG disbursements and services which appear on the QPR report sent to HUD on a quarterly basis. This information is recorded in two separate places through “record efforts / participant efforts”. First record the disbursements and then go back and record services for the same participant. The work flow chart below produced by HAP provides an example of data tracking for ESG.

## Entry of Data into ETO – Social Solutions Disbursement Stipend vs One-Time HPRP City



## CHART OF DATA REQUIREMENTS AND LOCATION IN DATABASE

The following chart indicates where data is captured in the database.

Data Element	Location in Database
First Name	Demographics, Standard/Enterprise Level
Last Name	Demographics, Standard/Enterprise Level
Date of Engagement	Demographics
Social Security Number	Demographics, Standard/Enterprise Level
Households/Families	Demographics, Standard/Enterprise Level *
Date of Contact	Demographics; Assessments; Point of Service
Homeless Status	Entry Assessment
Age and Gender	Demographic
Veteran Status	Entry Assessment
Chronically homeless	Entry Assessment
Ethnicity	Demographic
Race	Demographic
Special Needs	Entry Assessment
Prior Living Situation	Entry Assessment
Amount & Source of Monthly Income at Exit.	Exit Assessment
Program Entry Date	Demographic
Program Exit Date	Dismiss participant; Exit Assessment
Length of Stay in Program(who left)	Exit assessment
Length of Stay in Program (who did not leave)	Demographics
Reasons for Leaving	Exit assessment; Dismissal
Destination	Exit assessment
Supportive Services (those who left)	Record Efforts
Supportive Services during reporting period	Record Efforts
Supportive Service for all participants	Record Efforts
Overall Program Goals	Tracked individually by each agency
Beds	Bed Registry
Supportive Services	Record Efforts
For Supportive Housing (SHP) - HMIS Activities	Demographics; Assessments; Record Efforts
Housing Outcomes for Households served	Exit Assessment
Housing Funded Assistance+ Unit Composition	Record Efforts
Program Type (Prevention/Rapid Rehousing	Record Efforts
Household Type ( Family/Individual)	Entry Assessment
Financial Assistance	Record Efforts
Family Status	Entry Assessment

## CHART OF REPORTS DUE

The following Chart provides background information for reports due. Reports are due for CoC Programs and ESG within 30 days of the anniversary of the contract expiration date.

Contract Expires	Type	Provider	Program	Number to be served	Population Served	Gender	Subpopulations
8/31	CoC/PSH	HRU	Next Step	22	Indiv.	M/F	CH, MI, SA
6/30	CoC/PSH	MHA	Leahy House	5	Indiv.	M/F	CH, MI, SA
1/31	CoC/PSH	MHA	Shelter +Care PRA 12	11	Indiv.	M/F	CH, MI, SA
6/6	CoC/PSH	MHA	Shelter +Care SRA 20	20	Indiv.	M/F	CH, MI, SA
1/2	CoC/PSH	MHA	Shelter +Care SRA 12	12	Indiv.	M/F	CH, MI, SA
5/7	CoC/PSH	MHA	Shelter + Care SRA 16	16	Indiv.	M/F	CH, MI, SA
10/31	CoC/PSH	OPCS	Tranquility House	8	Indiv.	F	SA
3/31	CoC/PSH	RVCC	HIV/AIDS Residential Support	9	11 Indiv. + 6 Families	M/F	CH, SA, HIV
9/30	CoC/PSH	SMOC	Bowdoin St.	8	Indiv	F	SA
8/31	CoC/TH	HAP	Turning Point	9	Families	M/F	
6/30	CoC/SH	MHA	Safe Havens	6	Indiv.	M/F	CH, MI, SA
5/31	CoC/TH	MCDI	Annie's House	16	Indiv.	F	CH, MI, SA, DV
1/2	CoC/PSH	MLKFS	Project Permanence	8	Families	M/F	CH, MI, SA, DV
7/31	CoC/TH	Providence	Loreto House	21	Indiv.	M	SA
8/31	CoC/TH	Samaritan	Transitional	10	Indiv.	M/F	
11/01	HMIS	City Spgfd	HMIS	-	-	-	-
6/30	ESG	YWCA	DV Shelter	325	Indiv. & Families	F	DV
6/30	ESG	FOH	Emergency Shelter	1000+	Indiv.	M/F	CH, MI, SA
6/30	ESG	FOH	Housing search assistance	100	Indiv.	M/F	CH, MI, SA
06/30	ESG	Cath. Char.	Rapid Rehousing	50	Indiv.	M/F	

<b>06/30</b>	ESG	HAP	Rapid Rehousing	36	Families	M/F	
<b>06/30</b>	ESG	SPCA	Housing court assistance	40	Indiv. & Families	M/F	
<b>06/30</b>	ESG	MHA	Tenancy Preservation	30	Indiv. & Families	M/F	MI, SA
<b>06/30</b>	HOPWA	RVCC	Tenant-based rental Assistance	14	Indiv.	M/F	HIV/AIDS
			Housing Info Services	150	Indiv. & Families	M/F	HIV/AIDS, SA
			Supportive Services	14	Indiv. & Families	M/F	HIV/AIDS, SA
<b>06/30</b>	HOPWA	NNCC	Prevention	80	Indiv. & Families	M/F	HIV/AIDS, SA
			Housing Info Services	150	Indiv. & Families	M/F	HIV/AIDS, SA
			Security/First-month	50	Indiv. & Families	M/F	HIV/AIDS, SA
			Supportive Services	80	Indiv. & Families	M/F	HIV/AIDS, SA
<b>06/30</b>	HOPWA	AIDS CARE/	Tenant based rental assistance	12	Indiv. & Families	M/F	HIV/AIDS, SA
<b>06/30</b>	HOPWA	Cooley Dick	Housing Info Services	35	Indiv. & Families	M/F	HIV/AIDS, SA
<b>06/30</b>	HOPWA	Law Consortium	Legal Services	52	Indiv. & Families	M/F	HIV/AIDS, SA

## DATA QUALITY CONTROL

### PURPOSE OF DATA QUALITY CONTROL

One of the most challenging aspects of any data system is to maintain good quality data. The common expression: “Garbage in – Garbage out” often describes many data systems and the consequent frustration with their use and effectiveness. The CoC lead agency is ultimately responsible to make sure that the data is good. Typically, a quality control plan includes the following areas:

1. Timeliness: Is the data entered in a timely manner
2. Completeness: Is the data entered completely?
3. Accuracy: Is the data accurate?
4. Consistency: Are questions answered in the same way across the provider agencies?

The City of Springfield developed the following chart to summarize how it plans to address each of these issues. The data quality plan includes the following major checks and balances.

1. Monthly reports (see samples in following section)
2. Quarterly visits to each site to provide support and check in.
3. An annual review at each site.
4. Comparing all submitted reports against data stored in the database.

### SUMMARIZED CHART OF DATA QUALITY CONTROLS

General Principle	Specific Principle	Expected Benchmark	Monitoring Procedure Who? How often?
Completeness	All clients entered	95% of clients must have all universal data entered.  95% of clients must have an assessment  95% of clients qualifying for mid-term assessment must have assessment completed	Monthly reports sent to participating agencies.  (see sample in next section)
	Complete exit data entered	No more than 5 missing exit assessments.  No more than 5 incomplete exits assessments (includes completion of exit assessment)	Check missing exit assessments on monthly missing data report.  The HMIS Administrator will spot check 6 sites every month, checking recent exit assessments for completeness

General Principle	Specific Principle	Expected Benchmark	Monitoring Procedure Who? How often?
	All services entered	All clients must have at least one service record.	For HPRP check QPR monthly report against number of active clients.  For McKinney run Q 15 of APR monthly and check against number of active clients.
Accuracy	Truthfulness from clients	5 of the 6 records must be complete.	Annual visit to conduct random spot check of paper files against HMIS. Pull 6 records and look for client data in the database.
	Accurate data entered by staff	The APR and other annual or quarterly reports must match the data in the database.	The HMIS Administrator will check all submitted reports against data in the database. No report will be accepted if there is a discrepancy between the two sources
	Changing data kept up to date	Active clients should be reviewed by the local database administrator every 30 days.	The Springfield HMIS Administrator will review with the local HMIS Administrator in quarterly visits.
Timeliness	Data are entered soon after collected	Clients must be entered within 48 hours of intake.	Monthly reports to agencies (see samples in next section)
Consistency	Common interpretation of questions and answers	Data will be reviewed at the monthly data management meetings.	The HMIS Administrator will compare aggregate data by users for same population to look for unusual patterns on a quarterly basis.  Inconsistencies found during the month will be noted and discussed at the monthly data management meetings.
	Common knowledge of what fields to answer	95% of required fields completed	Monthly check of required fields in system – 95% of records have complete minimal fields

## SAMPLE DATA QUALITY REPORTS FOR THE ENTERPRISE

Monthly data quality reports are sent to each participating agency by the HMIS Administrator on the 15<sup>th</sup> of every month. Reports are run on the 9<sup>th</sup> of each month. Each agency should check their data before the 9<sup>th</sup> to make sure it is complete and accurate. The regularity of the reporting provides participating agencies with the opportunity to review data and update any missing elements before the HMIS Administrator assesses progress. Monthly reports include the following. Samples of these reports are provided in the following sections.

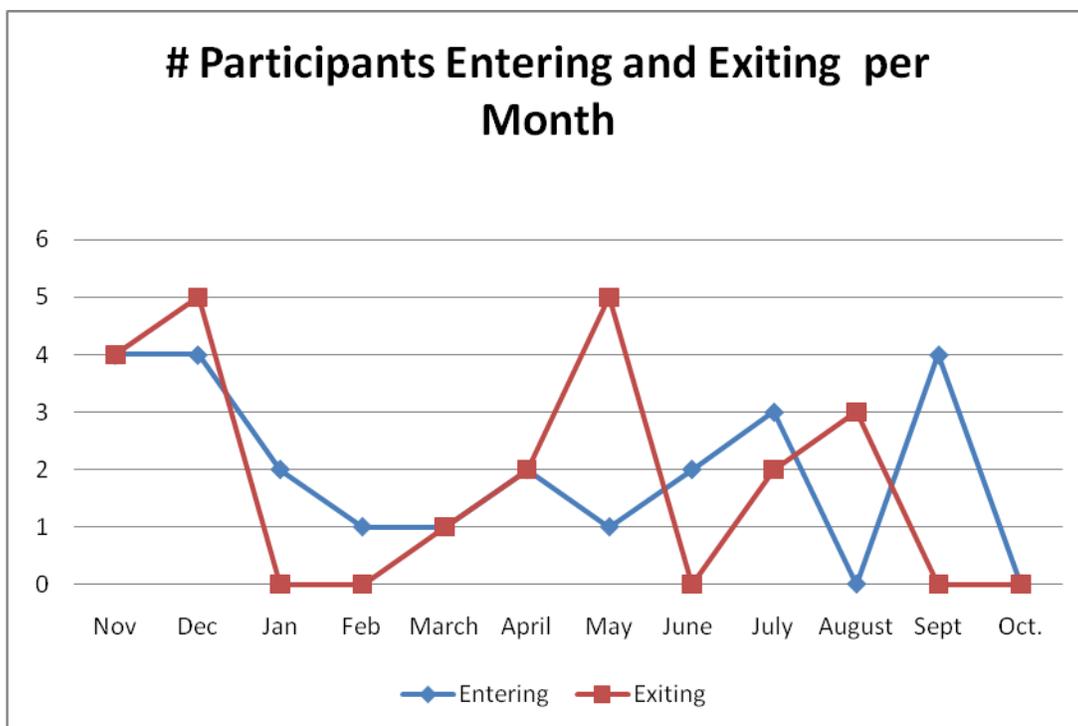
1. **Progress reports on expected contractual outcomes:** Each funded project has specific target requirements. Specific reports were created for each project to show the agency's progress to date on their contractual agreements. Both the dates and methods of tracking information vary according to the particular project. For example, some projects such as shelter funding look at monthly occupancy rates throughout the year. Other projects require serving a set number of participants by the end of the year. In this case, the monthly reports show a running cumulative number of participants served, indicating the percentage of the project requirements. This allows both the agencies and the City of Springfield to assess progress throughout the year. Each report also corresponds to the contract year. For example, if a contract begins in June, this will be the first month of the data reported so an agency will have an accurate accounting of its progress.
  
2. **Missing Data – Assessments:** This report alerts the participating agencies if they have failed to record more detailed assessment information. They have entered a new participant into the database, but have failed to provide one of the following assessments:
  - Missing entry assessment
  - Missing mid program assessment (required for all participants entered after September 1<sup>st</sup>, 2009 who are with the program for more than 1 year)
  - Missing exit assessment for participants who left the program
  
3. **Missing HUD Universal Data Elements:** Since the universal data elements are of primary concern to HUD and the ability to learn more about homelessness at the national level, the HMIS Administrator will track completion of these data elements on a monthly basis. Universal data elements include the following:
  - Social Security # Quality (may refuse, or not have a SS# but is asked)
  - Date of Birth
  - Date of Birth Quality (may refuse or not know, but is asked)
  - Primary race
  - Ethnicity
  - Gender
  - Veteran Status
  - Disabling Condition
  - Prior Residence
  - Prior Residence length of stay
  - Zip code of prior residence
  - Zip code quality (may refuse or not know but is asked)
  - Housing status

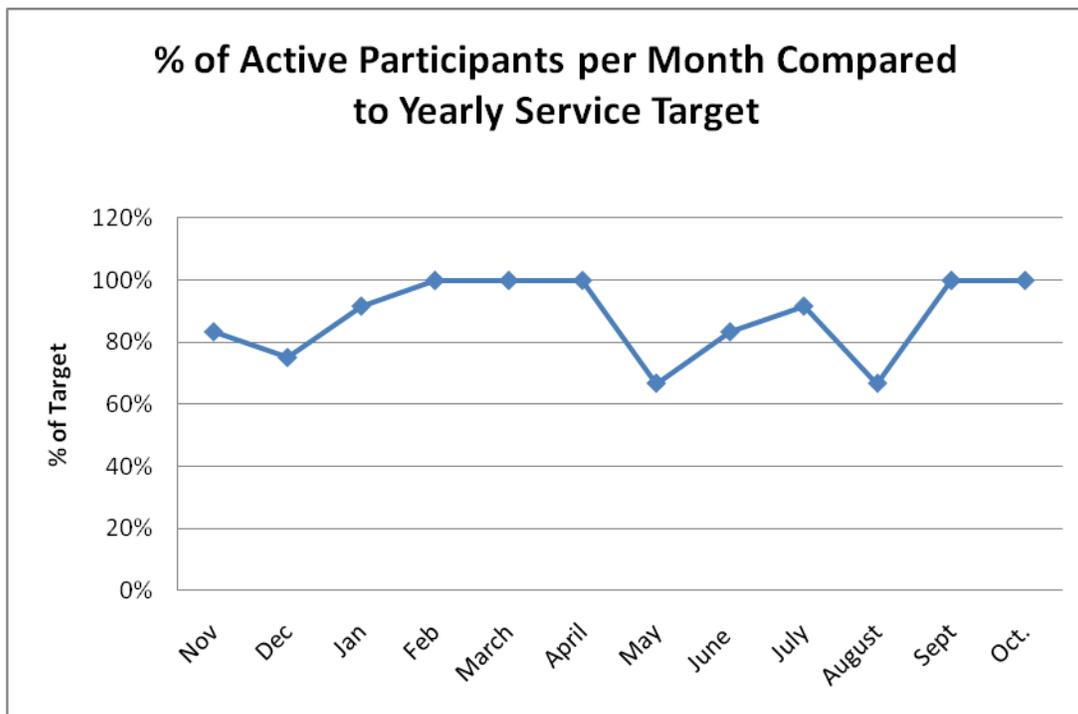
**CONTRACTUAL REPORTS - SAMPLE**

The following demonstrates sample monthly reports showing progress on the contract. There are two types of sample reports showing aggregate (cumulative) and occupancy rates. All data for these sample reports are fictional.

**Sample of Report Tracking Active / Occupancy Rate**

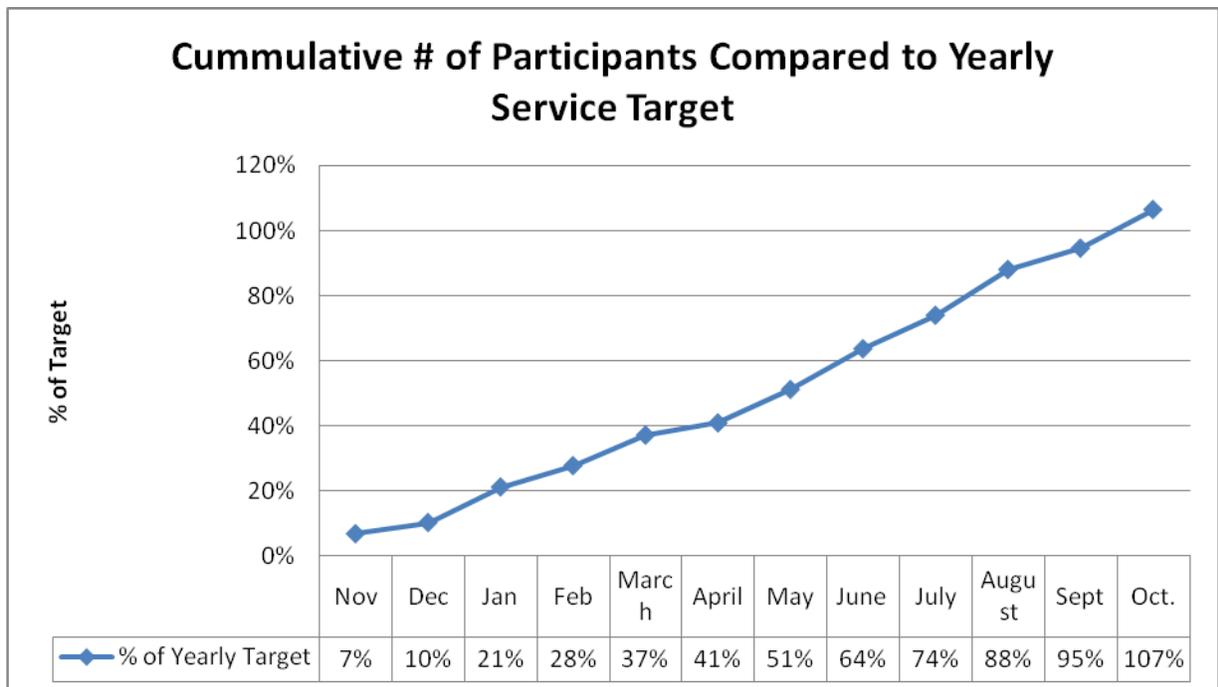
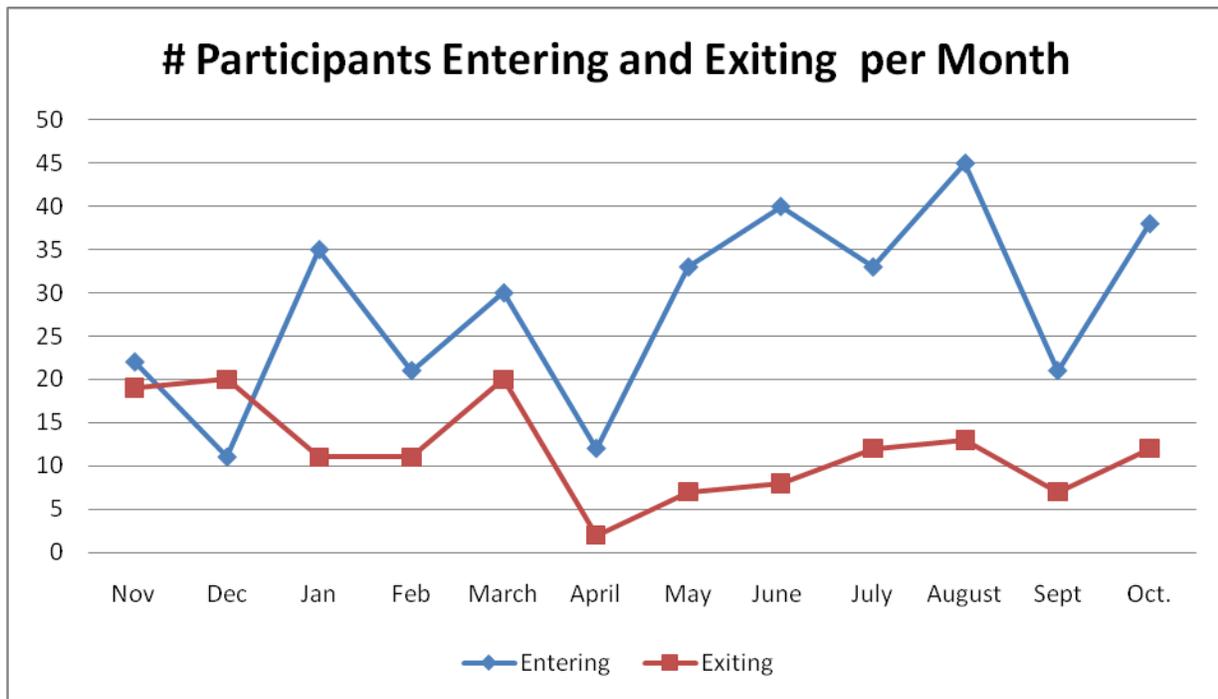
# of Active participants in the Month												
Program	Nov	Dec	Jan	Feb	March	April	May	June	July	August	Sept	Oct.
Name	10	9	11	12	12	12	8	10	11	8	12	12
To be served	12	12	12	12	12	12	12	12	12	12	12	12
% of Yearly Target	83%	75%	92%	100%	100%	100%	67%	83%	92%	67%	100%	100%
	Nov	Dec	Jan	Feb	March	April	May	June	July	August	Sept	Oct.
<b>Entering</b>	4	4	2	1	1	2	1	2	3	0	4	0
<b>Exiting</b>	4	5	0	0	1	2	5	0	2	3	0	0





**Sample of Report Tracking Cumulative Service Rates:**

Program	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct.
Entering	22	11	35	21	30	12	33	40	33	45	21	38
Exiting	19	20	11	11	20	2	7	8	12	13	7	12
Cumulative Totals (Entering)	22	33	68	89	119	131	164	204	237	282	303	341
To be served during year - FOH	320	320	320	320	320	320	320	320	320	320	320	320
% of Yearly Target	7%	10%	21%	28%	37%	41%	51%	64%	74%	88%	95%	107%



## MISSING DATA REPORT – SAMPLE

The following sample report provides information about missing assessments:

ErrorSeverity	ErrorType	CLID	Fname	Lname	Program	Details
Critical	No Entry Assessment During Enrollment	21805	XXX	XXX	Shelter Plus Care I (One)	Enrollment 01/01/2010 - today
Warning	Missing mid program enrollment for enrollment longer than 1 year	21805	XXX	XXX	Shelter Plus Care I (One)	Enrollment 01/01/2010 - today
Critical	No Entry Assessment During Enrollment	21759	XXX	XXX	Shelter Plus Care I (One)	Enrollment 01/01/2010 - today
Warning	Missing mid program enrollment for enrollment longer than 1 year	21759	XXX	XXX	Shelter Plus Care I (One)	Enrollment 01/01/2010 - today
Critical	No Entry Assessment During Enrollment	169053	XXX	XXX	Homeless Outreach Team	Enrollment 01/01/2010 - today

## UNIVERSAL DATA REPORT – SAMPLE

The following report returns information about missing universal data elements.

Total Program Participants = 20

Universal Data	Missing	# Missing	% Missing
SocialSecurityNumberQualityCode	Missing	0	
DateOfBirth	Missing	0	
DateOfBirthQualityCode	Missing	1	5%
PrimaryRace	Missing	0	
Ethnicity	Missing	0	
Gender	Missing	0	
VeteranStatus	Missing	3	15%
DisablingCondition	Missing	3	15%
PriorResidence	Missing	3	15%
PriorResidenceLengthOfStay	Missing	3	15%
ZipCode	Missing	3	15%
ZipQualityCode	Missing	3	15%
HousingStatus	Missing	3	15%

## QUALITY CONTROL LOG

The HMIS Administrator uses the following data quality control log to ensure that any changes requested were completed by the appropriate agency.

Agency	Program	Person Contacted	Date	Issue	Date of resolution	Description of Resolution
			1/18/2010	Entry assessment dates don't agree with program enrollment	1/19/05	Reviewed and corrected dates.
			1/25/2010	Enrolling children and adults separately and not entering them as a family	1/26/05	
			1/31/2010	Exit earlier than entry. Should these be reversed?		
			2/2/2010	Point of services date after exit date		
			2/3/2010	No entry assessment on children or other adult in family.		

## COMPLIANCE EXPECTATIONS (ADAPTED FROM COLUMBUS OHIO)

The following outlines compliance expectations of all funded agencies under the CoC Program, HOPWA, and ESG.

### A. PARTICIPATING AGENCY RESPONSIBILITIES:

Participating Agencies agree to:

1. Assure the accuracy of information entered into the system. Any updates in information, error or inaccuracy that comes to the attention of the participating agency will be corrected by such agency.
2. Perform routine Quality Assurance procedures to monitor data quality and promptly correct inaccuracies.

### B. PARTICIPATING AGENCY CONFIDENTIALITY RESPONSIBILITIES:

1. The participating agency agrees to abide by all present and future federal and state laws
2. The participating agency Executive Director must accept responsibility for the validity of all records entered by his/her agency. The Executive Director may designate an immediate subordinate staff member with supervisory responsibilities for verifying the accuracy of information. The participating agency will provide the City of Springfield with the name(s), and title(s) of the staff member(s) authorized to supervise data entry personnel.

### C. DATA TRACKING OF CLIENT SERVICES:

1. The agency implements a written plan for delivery of services and tracking of clients that includes the process for determining and recording outcome/exits.
2. The agency implements a written intake and client record keeping procedures and files that include:
  - ✓ Intake interview
  - ✓ Record of services provided.
3. Shelter and supportive housing programs maintain an up-to-date residence list that includes, at least, the name of each person residing in the program.

### D. REPORTING SUBMISSION DEADLINES:

1. Intake data should be entered into the HMIS **within 48 hours of the intake process.**
2. Individual Shelters only: Clients who stayed in shelter during the previous 24-hour period must be entered into HMIS daily by 9:00am.
3. Complete and accurate data for the month must be entered into by the **fourth working day of the month** following the reporting period.

For example, data for the month of April must be entered into HMIS by the fourth working day of May.

### E. DATA ACCURACY:

1. All clients have unique ID numbers (No duplications).
2. Missing/unknown data in HMIS is **less than 5% per month in required variable fields.**

For example, if the data for the variable veteran is unknown for less than 5% of clients during the month, the data is accurate. If unknown is greater than or equal to 5%, the data is inaccurate. The **only** data variable exception to accuracy, with respect to 'Unknown' is the variable Destination.

3. No data incompatible with program in HMIS.

For example, a family cannot be entered at a single men's shelter or a women's shelter.

4. Data in HMIS must accurately reflect client data recorded in the agency's client file and known information about the client and services provided to the client. For example, 'Exit Date' on the Columbus Worksheet should be the date the client physically exited the shelter.

## STANDARDS AND CHECKLISTS (ADAPTED FROM COLUMBUS OHIO)

The City of Springfield adopted and implemented the following standards developed by the Columbus Ohio Continuum of Care.

**Standard F1: Each participating agency has provided the City of Springfield with a list of all other affiliated agencies with which it shares HMIS data; and the type of HMIS data that are shared.**

Guideline F1: The up-to-date list is available for review and is on file with the City of Springfield.

**Standard F2: Participating agencies do not share HMIS data with any agency that has not entered into an HMIS agreement with the City of Springfield.**

Guideline F2: Each participating agency has a policy that precludes unauthorized data sharing. The policy is available for review.

**Standard F3: Each participating agency collects, enters and extracts only HMIS data that are relevant to the delivery of homeless services.**

Guideline F3: Each agency has a policy that precludes unauthorized data sharing. The policy is available for review.

**Standard F4: Each participating agency accurately enters all the required HMIS data elements, as specified by the 4<sup>th</sup> working day of the month.**

Guideline F4: Each agency has a Quality Assurance plan in place and a monthly verification that data was entered accurately and by the 4<sup>th</sup> working day. The plan is available for review. The program can provide verification that the QA Supervisor implements the plan on a monthly basis.

**Standard F5: Each agency has completed the City of Springfield User Agreement for each authorized system use and has provided a copy to the City of Springfield.**

Guideline F5: User agreements are up-to-date and on file at agency for each user. Agency user agreements are available for review and match the City of Springfield's user list.

**Standard F6: Each agency limits access to information provided by the HMIS database to its own employees specifically for verifying eligibility for service or entering records into the system of service provided.**

Guideline F6: Each agency has a policy regarding access to the HMIS database that is available for review. The policy should prohibit employees from using HMIS data in an unethical or unprofessional manner.

**Standard F7: All staff entering/viewing HMIS data in the HMIS system must be appropriately trained and have an individual user license with a unique user name and password.**

Guideline F7: The Site Administrator can describe training provided to staff and the process for ensuring that each user has a license with a unique name and password. Relevant documentation or tracking system is available for review.

**Standard F8: As staff members leave the employ of the agency, their HMIS user accounts are immediately inactivated or changed to accommodate a new user. The agency must contact the City of Springfield Systems Administrator to make these changes.**

Guideline F8: Each agency has a written procedure for handling HMIS account activation and deactivation as employees are hired or leave the agency that is available for review.

**Standard F9: Technical assistance requests and training issues should be limited to one point of contact with the City of Springfield systems administrator, typically the HMIS Administrator.**

Guideline F9: The Site Administrator can describe how technical assistance requests are handled internally and how technical assistance and training needs are communicated to City of Springfield.

**Standard F10: Signed “Client Consent for Data Collection” and “Client Consent for Data Release” forms from clients are kept on file.**

Guideline F10: The agency has a Quality Assurance Plan in place and monthly process that verifies that consents were obtained. Relevant documentation is available for review.

**Standard F11: Service Items and/or Worksheets added to the HMIS database have entry and exit dates that accurately reflect the paper files or intake packets.**

Guideline F11: The agency has a Quality Assurance Plan in place and a process for verifying that entry and exit dates in the files match the HMIS. The agency can produce actual files that contain information that matches the data entered into the HMIS.

## TRAINING

The City of Springfield will offer refresher training courses on basic database usage every six months or as needed. Each site will also receive a quarterly visit to work on specific issues arising from the database usage. The HMIS Administrator for the City of Springfield will also be available for questions and support by phone. The monthly

HMIS Sub-committee provides another opportunity for surfacing issues with the database that may require additional training. These trainings will be scheduled as needed.

Participating agencies will be responsible for training new hires and maintaining good quality data.

## LIST OF PARTICIPATING AGENCIES WITH CONTACT INFORMATION

### **Continuum of Care Funded Agencies:**

Center for Human Development  
Holly Florek Asst. Program Director  
Email: [hflorek@chd.org](mailto:hflorek@chd.org)

HAPHousing  
Ron Krakowiak, IT Manager (413) 233-1645  
Email: [rkrakowiak@haphousing.org](mailto:rkrakowiak@haphousing.org)  
Michael Downs (413) 233-1646  
Email: [mdowns@haphousing.org](mailto:mdowns@haphousing.org)

Human Resources Unlimited, 1401 State Street, Springfield, MA 01109  
Angel Middleton (Springfield) (413)736-8974  
Email: [AMiddleton@HRU.ORG](mailto:AMiddleton@HRU.ORG)  
Darlene Ducott (Westfield) (413)562-5293  
Email: [Darlene@HRU.ORG](mailto:Darlene@HRU.ORG)

Friends of the Homeless  
Janice Humason HPRP & HMIS Project Coordinator (413) 732-3069  
Email: [JTHumason@fohspringfield.org](mailto:JTHumason@fohspringfield.org)

Martin Luther King Jr. Family Services  
Andrew Teasley, 413-746-3655  
Email: [ateasley@mlkjrfamilyservices.org](mailto:ateasley@mlkjrfamilyservices.org)

Massachusetts Career Development Institution  
Tim Sneed (413)781-5640  
Email: [tsneed@mcditraining.org](mailto:tsneed@mcditraining.org)

Mental Health Association, Inc  
Jerry Ray, Director 413-734-5376  
Email: [jray@mhainc.org](mailto:jray@mhainc.org)

Open Pantry Community Services  
Allison Maynard, Director (413) 746-5386  
Email: [amaynard@openpantry.org](mailto:amaynard@openpantry.org)

Providence Ministries  
Christine Burns, Director (413) 563-9109 x11  
Email: [pnm3\\_development@comcast.net](mailto:pnm3_development@comcast.net)

River Valley Counseling Center  
Javier Cruz (413) 737-2437 x105  
Email: [cruz\\_javier@holyokeyhealth.com](mailto:cruz_javier@holyokeyhealth.com)

Samaritan Inn  
Jennifer Lucca (413) 568-3122  
Email: [jensbliss57@aol.com](mailto:jensbliss57@aol.com)

South Middlesex Opportunity Council  
Allison Maynard, (413) 746-5386  
Email: [amaynard@openpantry.org](mailto:amaynard@openpantry.org)

### **Emergency Solutions Grant (ESG)**

Catholic Charities  
Laura Saponare(413) 452-0605  
Email: [lsaponare@diospringfield.com](mailto:lsaponare@diospringfield.com)

Friends of the Homeless  
Janice Humason (413) 732-3069  
Email: [JTHumason@fohspringfield.org](mailto:JTHumason@fohspringfield.org)

HAPHousing  
Ron Krakowiak, IT Manager (413) 233-1645  
Email: [rkrakowiak@haphousing.org](mailto:rkrakowiak@haphousing.org)

Springfield Partners for Community Action  
Stephen Plummer Eviction Counselor (413)263-6500 x6567  
Email: [Stephen@springfieldpartnersinc.com](mailto:Stephen@springfieldpartnersinc.com)

YWCA (DV provider; does not report HMIS)  
Wanda Moctezuma (413)732-3121 x 158  
Email: [wm@ywworks.org](mailto:wm@ywworks.org)

### **Housing Opportunities for Persons with AIDS (HOPWA)**

New North Citizens Counsel  
Maria Perez, HOPWA Coordinator (413)746-4885  
Email: [Mperez@newnorthcc.org](mailto:Mperez@newnorthcc.org)

AIDS Care/Cooley Dickinson  
Betsy Shally-Jenson, Director (413) 586-8233 x 5  
Email: [Betsy\\_Shally-Jenson@cooley-dickinson.org](mailto:Betsy_Shally-Jenson@cooley-dickinson.org)

HIV/AIDS Law Consortium  
Rose Maloof, Director (413) 732-0011  
Email: [Rmaloof@chd.org](mailto:Rmaloof@chd.org)

River Valley Counseling Center  
Javier Cruz (413) 73702437 x105  
Email: [cruz\\_javier@holyothealth.com](mailto:cruz_javier@holyothealth.com)