Appendix D. HMIS Data Quality Monitoring Visit Report and Improvement Plan

DATA QUALITY MONITORING VISIT REPORT

Date of Monitoring Visit: _____

Person Conducting Monitoring: _____

Name of Organization: _____

Organization Contact and Information: _____

Name of Project and Type of Project Monitored: _____

Organization Staff Present During Monitoring

Each baseline and expectation met below accounts for (_____) points for a total of (_____) allowable points.

Include the specific baseline requirements for the specific project type to be monitored:

Data Completeness baseline: _____ Baseline Met? _____ Yes _____ No

Data Timeliness baseline: _____ Baseline Met? _____ Yes _____ No

Data Accuracy baseline: _____ Baseline Met? _____ Yes _____ No

Data Consistency expectation met? _____ Yes _____ No

Coverage & Utilization expectation met? _____ Yes _____ No _____ Not applicable

Total Score: _____

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Each item in the "observed" column accounts for (___) points for a total of (____) allowable points. The combined total of the total score in the section above and the total score in the section below results in the specific project's monitoring visit score.

Projects with scores between (____) – (____) will be determined as "exceeding expectations".

Projects with scores between (____) – (____) will be determined as "meeting expectations".

Projects with scores between (____) – (____) will be determined as "below expectations".

Projects with scores between (____) – (____) will be determined as "severely at-risk".

For those in the "outcome" column defined as "Action Needed", the "Notes" section must include action steps with specific timelines.

Requirement	Observed		Outcome	Notes
Data Collection & Quality	_____	The project has not required the use of a Data Quality Improvement Plan to address data quality issues since the last monitoring visit	____ Action Needed ____ In Compliance	
	_____	The organization documents the homeless status of clients served, as well as any other eligibility criteria for the project		
	_____	Intake workers and HMIS users understand the required data elements and how to present them to clients in a way to get accurate information		
	_____	The organization's paper intake forms, if applicable, include all data elements required to be entered into HMIS		
	_____	Random selection of client files show complete data collection process and match data entry in HMIS		

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Upon completion of monitoring visit

Data Quality Improvement Plan Needed?   _____ Yes   _____ No

     If yes, has plan been created?   _____ Yes   _____ No

Notes

_____   _____
Person completing monitoring visit signature   Date

_____   _____
Monitored organization staff member signature   Date

Appendix D. HMIS Data Quality Monitoring Visit Report and Improvement Plan

DATA QUALITY IMPROVEMENT PLAN

Date of Data Quality Improvement Plan (DQIP) Implementation: _____

Name of Organization: _____

Organization Contact and Information: _____

Name of Project(s) Included in DQIP

Organization Staff Responsible for DQIP:

_____	_____
Staff Person	Role
_____	_____
Staff Person	Role
_____	_____
Staff Person	Role

HMIS Lead Staff Responsible for DQIP:

_____	_____
Staff Person	Role
_____	_____
Staff Person	Role

CoC Staff Responsible for DQIP:

_____	_____
Staff Person	Role
_____	_____
Staff Person	Role

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Issue	Baseline Not Currently Being Met	How to Address	How Often and who is responsible	Date Completed
[Example] Destination data completeness rate an issue for three consecutive reporting periods	Destination data completeness less than 95% (includes "no exit interview completed" responses)	In-person meeting with agency, HMIS Lead, and CoC to discuss what's happening "in real life" and "real world" implications of poor destination data completeness rates	Initially – ongoing, if needed (Agency, HMIS Lead, CoC)	
		Review paper intake / exit assessments to ensure necessary data elements are included on the forms	Initially (Agency, with input from HMIS Lead as needed)	
		Provide refresher training to HMIS users to ensure data entry for destination data is completed accurately	Ongoing, if needed (HMIS Lead)	
		Run data completeness report every two weeks	Ongoing (Agency and HMIS Lead)	
		Increase in destination data completeness for at least three consecutive months	Ongoing (Agency and HMIS Lead)	

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Additional Narrative:

If the Organization does not remain communicative and interactive with the HMIS Lead to address the issue by following through with the above steps, the CoC will consider this DQIP in default and will use incentives and enforcements available, including a loss of supports and dollars currently provided to the Organization.

Acknowledgement and Acceptance of Data Quality Improvement Plan

_____   _____

Program Manager/Organization Executive Director   HMIS Lead Manager/Director

_____   _____

Date   Date

_____

CoC Manager/Director

_____

Date