

Quarterly Data Quality Process

June 9, 2025

Quarterly Data Quality Process

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Context

The Chicago Continuum of Care (CoC) utilizes data-informed approaches to coordinate services and resources in its efforts to end homelessness.

The quality of data from the Homeless Management Information System (HMIS) is a crucial factor in measuring efforts to end or prevent homelessness. The CoC depends on all providers, regardless of funding type, to enter accurate, complete, and timely data. This ensures that we have the necessary information to make informed decisions as a community.

Context

Due to this importance on data, and in order to maintain data quality, providers in the HMIS are expected to participate in a quarterly data quality process that addresses data in the following four areas:

- Missing Values / Data Issues
- Child-Only Entries
- Bed Utilization
- Timeliness

Missing Values / Data Issues

No more than 5% of clients enrolled in the project may have missing values or data entry errors, including instances where data not collected was selected.

Name, SSN, and Date of Birth include the list below as errors:

- Client Doesn't Know
- Client Prefers Not to Answer

Destinations include the list below as errors:

- No exit interview completed
- Other

Data Element	Required for
Name	All
Social Security Number	All
Date of Birth	All
Race	All
Ethnicity	All
Gender	All
Veteran Status	Adults
Prior Living Situation	Adults/HoH
Length of Stay in Previous Place	Adults/HoH
Relationship to Head of Household	All
Client Location	HoH ONLY
Domestic Violence	Adults/HoH
Disability Entry	Adults/HoH
Disability Exit	Adults/HoH at Exit
Income at Entry	Adults/HoH
Income Exit	Adults/HoH at Exit
Non-Cash at Entry	Adults/HoH
Non-Cash at Exit	Adults/HoH at Exit
Insurance at Entry	All
Insurance at Exit	All at Exit
Destination at Exit	All at Exit

Child-Only Entries

There must be zero child-only entries. A child only entry is flagged when a client under the age of 18 is enrolled in a project without being connected to a parent/guardian. This can happen for two reasons:

1. The child was entered separately from their parent/guardian
2. The client's date of birth is missing

If your project serves unaccompanied youth under 18, we ask that you send a ticket to Helpdesk@allchicago.org

Child Only Entries (Tab C):	
Entries in which there is no adult at enrollment	

Utilization

Bed/Unit utilization must be within the following ranges:

- Emergency Shelters: 80%-105%
- Transitional Housing: 80% - 105%
- Permanent Supportive Housing: 85% - Greater
- Rapid Rehousing: 85% - Greater
- Safe Haven: 85% - 105%

The utilization for the majority of project types looks at how many clients were enrolled in your project on February 12, 2025, as compared to how many beds/units are indicated in your Bed and Unit Inventory. PSH and RRH projects require that clients have a Housing Move-in Date on or prior to February 12, 2025, to be included.

Utilization

As long as either bed or unit utilization meets compliance standards, the project as a whole will be considered compliant for utilization.

Utilization		
BED UTILIZATION		
Comparing the number of Clients Enrolled on with the number of Beds If the Project type is PH, the client must have a housing move in date that is in range of the enrollment If the number of beds is inaccurate, please visit the helpdesk and fill out a unit list update form	Bed Inventory	
	# Enrolled	
	Bed Utilization Rate	
ROOM/UNIT UTILIZATION		
Comparing the number of Households Enrolled on with the number of Rooms/Units If the Project type is PH, the clients must have a housing move in date that is in range of the enrollment If the number of rooms/units is inaccurate, please visit the helpdesk and fill out a unit list update form	Unit Inventory	
	# Households Enrolled	
	Room/Unit Utilization Rate	
UTILIZATION COMPLIANCE		
Projects are measured by their project type, and the project must be in compliance with either their bed or unit utilization, if one is out of compliance but the other is not, then the project as a whole is still in compliance	Emergency Shelters: 80%-105% Transitional Housing: 80% - 105% Permanent Supportive Housing: 85% or greater Safe Haven: 85% - 105%	

Utilization

A Housing Move-in Date column allows PSH and RRH providers to see which clients are being counted in the utilization table.

PSH and RRH clients must have an HMID added that is on or before the PIT date and the HMID is on or after the Entry Date. HMID before the Entry or after the set PIT date (2/12/25) will not be included in the utilization table. They will show on the Client Details tab as "Date out of range".

"Date out of range" is NOT always an indication of an error. If the client has a HMID on or greater than 2/13/25 they will not be included in the utilization table, but this date should not be changed in HMIS if it's a valid entry.

If you are working on an RRH project and the Bed and Unit inventory is NULL, please reach out to Helpdesk@allchicago.org.

Insurance at Exit	Housing Move in Date	Destination at Exit
-	6/1/07	
-	8/1/06	
-	Date out of range	
-	Date out of range	
-	10/22/13	
-	10/22/13	
-	10/22/13	
-	11/24/04	
-	Date out of range	
-	11/24/04	
-	8/19/06	
-	8/17/06	
-	11/18/06	

Housing Move-in Date

05 / 22 / 2024



Client's current Housing Type/Location:

Rental by client, no ongoing housing subsidy (HUD)

Timeliness

Timeliness is tracked through an automated report created by All Chicago. This timeliness report will track the timeliness:

- At entry
- At exit
- At housing move-in dates
- For shelter services

Timeliness measures the time it takes to create an element in HMIS. This measure applies even if the entry date is backdated. For instance, if a client originally came into a project on 2/1/2025, but they were not entered into that project in HMIS until 2/4/2025, the information will be considered out of compliance as it took 3 days to indicate that the client was enrolled in the project. Timeliness data cannot be corrected.

Who Participates

All projects, regardless of funding, are required to participate in the quarterly data quality process. So long as a project is active and has at least one client enrolled.

Please refer to the list of currently active projects that are expected to participate in the data quality process.

<https://hmis.allchicago.org/hc/en-us/articles/115005062126>

If the project does not enter data into HMIS they are not required to participate in the DQ process.

Report Details

Reports must be generated for 1 project at a time

The report will be looking at the period from January 1, 2025, to March 31, 2025

In the report, the point-in-time date is set for February 13, 2025 (PIT Date Plus one day)

This looks at how many clients were enrolled on the night of February 12th against how many units/beds the project is reported to have.

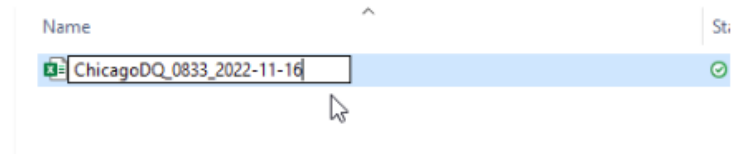
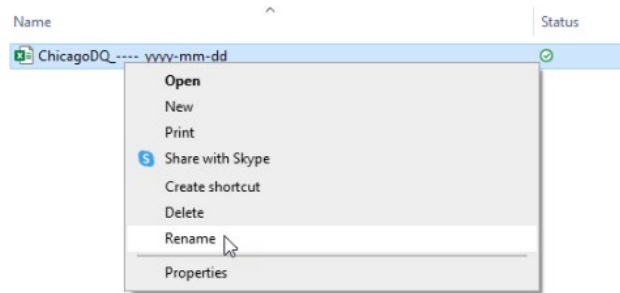
This Quarter's Overview

- Data Quality process will go from June 9th – June 20th
- There will only be one round for submissions. Providers will not need to send in DQ reports until they are ready for final submission.
- BusinessObjects reports, which can only be downloaded by users with access to BusinessObjects, will cover the following:
 - Missing values
 - Child-only entries
 - Bed utilization
- Changes made in HMIS will not be generated in BusinessObjects until the following day.
- Timeliness Reports will be sent to ATAs this week. This report is for your reference. Timeliness cannot be fixed or does not need to be submitted via this process.

Submission Process

Reports are to be submitted by the June 20th deadline.

.xlsx Files must be renamed using the ChicagoDQ_----_yyyy-mm-dd template. Adjust the project ID (----) and the date (yyyy-mm-dd) in the file name before submission






The project ID number in the file name MUST be 4 digits. If a project has less than a 4-digit ID number a "0" should be placed before the ID number in the file name.

Sending Reports

- To submit the Chicago DQ report, please create an email to **DataQuality@allchicago.org**.
- The subject line must be “**Data Quality Report Submission Attachments**”.

Agencies with more than one project can attach all their data quality reports together in one email; there is no need to send them separately.

Please ensure that the files attached are Excel files. PDF files will not be accepted.

 Send	From ▾	
	To	dataquality@allchicago.org
	Cc	
	Bcc	
Subject		Data Quality Report Submission Attachments
<hr/>		
	ChicagoDQ_0885_2020-03-06.xls 315 KB ▾	
		ChicagoDQ_8555_2020-03-06.xls 315 KB ▾

Hello, |
Please find my DQ materials attached.

Regards,

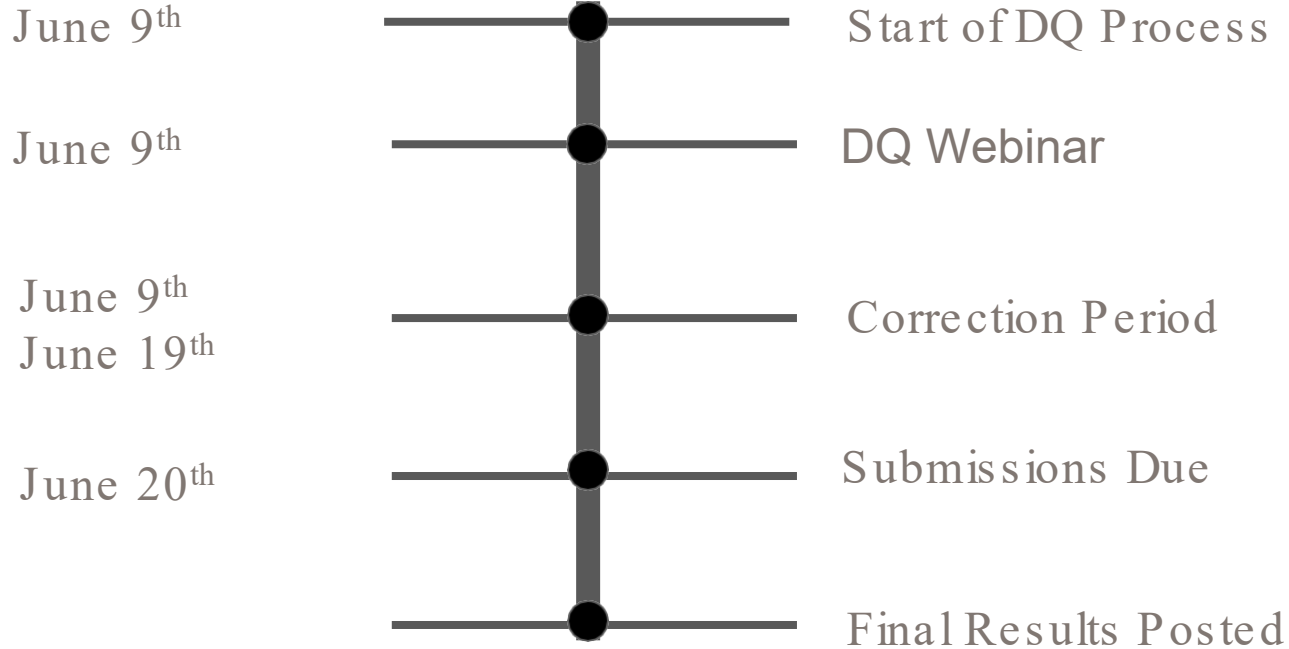
John Q Public | **Agency**

Agency

Fake Address Chicago, IL 60661

Office: 555-555-5555 ext. 555

Data Quality Time line



Accessing / Reviewing DQ Report

Troubleshooting

- Legend can be found on the tab titled Client Detail Key
- This key will provide details on the location of questions in HMIS
- Name DQ, SSN DQ, and Veteran Status are the only questions that will be found outside of the enrollment assessment. These questions are in the Client Profile.

Client Detail Key

Alert	Description
Cell Contents	The value is of low quality and might be improved if reviewed with the client. APS - Approximate or Partial SSN PNR - Partial Name Reported ADB - Approximate or Partial DOB DKR - Client Doesn't Know or Client Refused
-	Displays a dash if the particular element does not apply to the client. Most often appears on children/non heads of households and exit values for unexited clients.
Null or DNC	Value is missing
Mismatch or HUD Verif	The Yes/No answer to whether or not the client has a Disability or is receiving any Income, any Non-Cash Benefit, or any Insurance does not match the sub-assessment. For example, if the answer is "Yes" to the question about if the client has any kind of Disability, there must be one identified in the sub-assessment as being a disabling condition. If the answer is "No" to the question about if the client receives any kind of Income, there must not be any source of income identified in the sub-assessment.

Field in Table	Question in Assessment
Name Data Quality	Looks at the Name Data Quality question located in the Client Profile tab.
SSN Data Quality	Looks at the SSN Data Quality question located in the Client Profile tab.
DOB Data Quality	Looks at the Date of Birth Type question located in the Entry assessment.
Primary Race	Looks at the Primary Race question located in the Entry assessment.
Ethnicity	Looks at the Ethnicity question located in the Entry assessment.
Gender	Looks at the Gender question located in the Entry assessment.
Veteran Status	Looks at the U.S. Military Veteran question located in the Client Profile tab.
Prior Living Situation	Looks at the Prior Living Situation question located in the Entry assessment.
Length of Stay	Looks at the Length of Stay in Previous Place question located in the Entry assessment.
Relationship to HOH	Looks at the Relationship to Head of Household question located in the Entry assessment.
Location	Looks at the Client Location question located in the Entry assessment. Selection other than IL-510 will show as error.
Domestic Violence	Looks at the Domestic violence victim/survivor question located in the Entry assessment.
DV Experience	Looks at the "If yes for Domestic violence victim/survivor, when experience occurred" question located in the Entry assessment. Only if YES for Domestic violence victim/survivor question was selected.
Disability at Entry / Disability at Exit	Looks at the "Does the client have a disabling condition?" question and Disabilities sub-assessment located in either the Entry or Exit assessment respectively.
Income at Entry / Income at Exit	Looks at the "Income from Any Source" question and Monthly Income sub-assessment located in either the Entry or Exit assessment respectively.
Non-Cash at Entry / Non-Cash at Exit	Looks at the "Non-cash benefit from any source" question and Non-Cash Benefits sub-assessment located in either the Entry or Exit assessment respectively.
Insurance at Entry / Insurance at Exit	Looks at the "Covered by Health Insurance" question and Health Insurance sub-assessment located in either the Entry or Exit assessment respectively.
Destination at Exit	Looks at the Destination question located in the first prompt of the Exit assessment.

EVA Reporting

During this iteration of Data Quality (DQ), we encourage providers to not only generate and review the DQ report available in BusinessObjects but also to review their project data using EVA. At this time, EVA reports are not required to be submitted to All Chicago as part of the DQ process but will become more integrated into the overall DQ process in the future.

Providers should generate a HASHED CSV from HMIS for the date of the DQ period 1/1/2025 – 3/31/2025. Areas of focus providers should be reviewing in the EVA are:

- Overlapping / Duplicate Enrollments
- Relationship to Head of Household
- Too Many Heads of Household
- No Head of Household
- Enrollment CoC

For details about how to use EVA please see our dedicated EVA article:

<https://hmis.allchicago.org/hc/en-us/articles/23278345944212>

Accessing / Reviewing EVA Report

User Resources

We have two articles on the Data Quality process:

- [Data Quality Process Overview](#)
- [Running and Interpreting the Data Quality Report](#)

Both articles will have a link to the recorded version of this webinar and slides.

Other helpful links:

- [Sub-assessments and HUD Verifications](#)
- [Documenting the Housing Move-In Date](#)
- [Relationship To Head of Household](#)

User Resources: Requesting Assistance

Agencies can book dates to meet with the HMIS Team from June 9th - June 13th (opened June 3rd) to address any questions or issues with their reports. Before booking a session, please note the following:

- Sessions will be done online via Microsoft Teams
- An Agency Technical Administrator, or someone with BusinessObjects access, must be on the call as well
- Please have your report available at the time of the call, or email the report you plan on referencing beforehand

Please book an available time here:

https://outlook.office.com/book/HMISTeamCopy@allchicago.org/s/_qBI8WJX3kOs29NcAwkGAQ2

Q & A

Thank you!