Bitfocus

NEVADA HMIS DATA QUALITY PLAN

V4

September 10, 2026

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SUMMARY OF CHANGES:

- Clarified the connection between data entered in HMIS to CoC Program and HMIS requirements.
- Restructured and retitled components of the plan for alignment with federal expectations.
- Removed specific data elements and added a link to the HMIS Data Standards to ensure the information remains current and accurate.
- Clarified Roles and Responsibilities.
- Updated minimal thresholds and benchmarks.
- Added Accuracy measures.
- Provide frequency of Agency Data Quality Monitoring.
- Clarified Performance Monitoring.

Introduction

The Continuum of Care (CoC) program authorized by the McKinney-Vento Homeless Assistance Act (PL 111-12) is designed to:

- Promote community wide commitment to the goal of ending homelessness;
- Provide funding for efforts by nonprofit providers, States, and local governments 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;
- Promote access to and effective utilization of mainstream programs by homeless individuals and families; and
- Optimize self-sufficiency among individuals and families experiencing homelessness.

To support these efforts CoCs must designate and operate a Homeless Management Information System (HMIS) to collect data about individuals, projects, and service delivery. This data:

- Is a requirement of CoC and other federal programs;
- Informs national policy (e.g. Annual Homeless Assessment Report);
- Informs local planning including data-informed decisions related to funding and allocation of resources; and
- Enhances coordinated entry and case management by prioritizing the most vulnerable as well as ensure accurate and successful referrals to housing projects.

The Nevada Statewide Community and Homeless Management Information System (CMIS/HMIS) is Nevada's electronic data collection system that maintains person-level data about the individuals and families who receive homeless and other human services throughout the community. The HMIS also assists agencies with program administration, operations, and reporting. HMIS can be used for many different functions including maintaining persons served and agency information, bed/unit availability, and service delivery. Some of the typical benefits of a data collection system such as the HMIS include:

- Improved service delivery and prompt referrals for individuals and families
- Immediate access to important person-level information
- Quick and easy preparation of reports for funders and stakeholders

Collected Data

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 provide services to persons experiencing homelessness. Other federal partners also use it to measure project performance and participate in benchmarking of the national effort to end homelessness.

Full definitions of all data elements can be found in the HMIS Data Standards Manual: https://files.hudexchange.info/resources/documents/HMIS-Data-Standards.pdf

Universal Data Elements

The Universal Data Elements (UDEs) establish the baseline data collection requirements for all homeless housing and/or service providers entering data into the HMIS regardless of funding source. They are the basis for producing unduplicated estimates of the number of homeless people accessing services from homeless assistance providers, basic demographic characteristics of people who are homeless, and patterns of service use, including information on shelter stays and homelessness episodes over time.

Common Program Specific Data Elements

Common Program Specific Data Elements (PDEs) provide information about the characteristics of persons, the services that are provided, and outcomes. Many of these data elements represent transactions or information that may change over time. Most Program Specific Common Data Elements should be captured at project start and exit, and a few must be captured at project start, exit, and on an annual basis.

Federal Partner Program Specific Elements

Federal Partner Program Specific Elements are elements maintained by one partner and shared with at least one other. When combined with the Universal Data Elements and Common Elements, these elements form the basis of data collection requirements for specific project level reporting generated by an HMIS. The following are Federal Partner Programs that collect specific data element in HMIS:

- HUD - CoC Program
- HUD - ESG Program
- HUD - HOPWA Program
- HHS - PATH Program
- RHY Program
- VA Program

Components of a Data Quality Plan

A data quality plan is a community-level document that facilities the ability of the CoC to achieve statistically valid and reliable data. A data quality plan sets expectations for the CoC, the HMIS Lead Agency and the end users to capture valid and reliable data on persons accessing the homeless assistance system throughout the community.

The Data Quality Plan:

- Identifies the responsibilities of all parties within the CoC with respect to data quality;
- Establishes specific data quality benchmarks for timeliness, completeness, accuracy, and consistency;
- Describes the procedures for implementing the plan and monitoring progress toward meeting data quality benchmarks; and
- Establishes a timeframe for monitoring data quality on a regular basis.

Roles and Responsibilities

The HMIS Lead Agency:

- Develops the Data Quality Plan.
- Works with the System Administrator and participating agencies to ensure the standards outlined in the Data Quality Plan.
- Partners with the System Administrator in conducting data quality monitoring activities.
- Communicates with CoCs, Nevada Statewide HMIS Subcommittee, and partner agencies about data quality monitoring and reporting efforts.

The CoC:

- Formally adopts the Data Quality Plan as defined by the respective CoC charters and/or bylaws.
- Utilizes HMIS data to inform decision making including, but not limited to, funding and allocation of resources.
- Supports data quality monitoring efforts by the HMIS Lead and System Administrators of participating HMIS Agencies.
- CoC Coordinators partner with the System Administrator in conducting data quality monitoring activities.

The System Administrator:

- Provides end user training and workflow documents.
- Supports Agency Data Leads (ADL) in their role within their respective agencies.
- Partners with the HMIS Lead in conducting data monitoring activities.
- Produce data quality reports and information on how to correct any identified data quality issues.
- Provides technical assistance to agencies in identifying steps to take in order to correct data quality issues.
- Provides other services as contracted with the HMIS Lead Agency.

HMIS Participating Agencies:

- Agency management identifies at least one agency employee as a HMIS Agency Data Lead (ADL).
- Agency management ensures staff tasked with correcting data quality issues do so in a timely manner.
- Take primary responsibility for entering, verifying, and correcting data entry.
- Meet the data quality thresholds and benchmarks described in this document.
- Measure data completeness by monitoring and reviewing data quality reports in HMIS and distributing those reports to staff tasked with improving data quality and completeness.
- Respond to data quality requests in a timely manner or by stated due dates.
- Work with community partners to resolve data quality issues when affecting Partner Agency data.

Data Quality Benchmarks and Thresholds

Data quality is a term that refers to the reliability and validity of person-level data in HMIS. With good data quality, a CoC can accurately tell the story of the individuals and families it serves. There are four components of data quality:

- Timeliness
- Completeness
- Accuracy
- Consistency

Minimal thresholds indicate acceptable performance while benchmarks reflect the desired performance.

Timeliness

Timeliness refers to length of time that elapses between data collection and data entry. Entering data into the HMIS in a timely manner helps to reduce human error that can occur when too much time has elapsed between the time of data collection/service transaction and the time of data entry. Timely data entry also ensures that the data is accessible when it is needed, whether for monitoring purposes, meeting funding requirements, responding to requests for information, or for other purposes.

Efforts should be made to enter all data into HMIS within one day of event or collection. However, there is recognition of barriers to timely data entry. Toward that end, the following data entry minimal thresholds are set forth:

PROJECT TYPE	PROJECT START RECORD ENTRY	PROJECT EXIT RECORD ENTRY
Emergency Shelter Projects	≤ 7 days	≤ 7 days
Transitional Housing and Permanent Housing (including Rapid Re-housing and Permanent Supportive Housing) Projects	≤ 3 days	≤ 3 days
Supportive Service Only Projects (including Diversion and Navigation)	≤ 3 days	≤ 3 days
Homeless Prevention Projects	≤ 3 days	≤ 3 days
Street Outreach Projects	≤ 5 days	≤ 5 days

Completeness

Completeness is the degree to which all required data is known and documented. Complete HMIS data is necessary to fully understand the demographic characteristics and service use of persons accessing homeless housing and services in the community. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, including:

- Unduplicated counts of persons served;
- Patterns of use of persons entering and exiting the homeless assistance system in the community; and
- Evaluation of the effectiveness of the community’s homeless assistance system.

Complete HMIS data helps a CoC meet various funding compliance requirements and ensures that persons in the homeless assistance system receive the services needed to secure and maintain permanent housing. All projects using the HMIS shall enter data for one hundred percent (100%) of persons served.

The CoC recognizes that collecting 100% of all data elements (Universal and Program Specific) may not be possible in all cases. Responses of “Client doesn’t know” and “Client prefers not to answer” should be utilized when persons are asked for information, but it is not known or provided by the individual. These responses reflect complete data collection. Responses of “Data not collected” and missing data fields reflect incomplete data.

The following minimum thresholds (e.g. null missing items) and benchmarks are used to measure completeness of data:

DATA ELEMENTS WITHIN THE APR	BENCHMARK %	ACCEPTABLE NULL/MISSING/DON’T KNOW/REFUSED %
Name	**100%**	5%
Social Security Number	**100%**	5%
Date of Birth	**100%**	5%
Race and Ethnicity	**95%**	5%
Veteran Status	**95%**	5%
Project Start Date	**100%**	0%
Relationship to Head of Household	**100%**	0%
Enrollment CoC	**100%**	0%
Disabling Condition	**95%**	5%
Destination	**95%**	5%
Income and Sources at Start	**95%**	5%
Income and Sources at Annual Assessment	**95%**	5%
Income and Sources at Exit	**95%**	5%

OTHER DATA ELEMENTS	BENCHMARK %	ACCEPTABLE NULL/MISSING/DON'T KNOW/REFUSED %
Project Exit Date	**100%**	0%
Housing Move in Date	**100%**	0%
Non-Cash Benefits	**95%**	5%
Health Insurance	**95%**	5%
Physical Disability	**95%**	5%
Developmental Disability	**95%**	5%
Chronic Health Condition	**95%**	5%
HIV/AIDS	**95%**	5%
Mental Health Problem	**95%**	5%
Substance Abuse	**95%**	5%
Domestic Violence	**95%**	5%
Current Living Situation	**95%**	5%
Date of Engagement	**95%**	5%
Bed-Night Date	**100%**	0%
Coordinated Entry Assessment	**95%**	5%
Coordinated Entry Event	**95%**	5%

Accuracy

Accuracy is the degree to which data reflects the best representation of the individuals and families real-word situation and the programs that provide housing services. Accurate collection and entry of data into HMIS ensures that the data is the best possible representation of reality as it relates to homeless persons and the projects that provide homeless housing and services. All data entered into HMIS shall accurately reflect information provided by the person and as documented in their file, along with information known about the person and the housing and/or services received. Changes or updates in information shall be reflected in HMIS as they occur.

CoCs rely on accurate data to inform strategies and efforts to end homelessness, and set the following thresholds and benchmarks:

	THRESHOLD %	BENCHMARK %
Bed and Unit Inventory Coverage	90%	**100%**
Bed Utilization	70%	**90%**
Head of Household Issues (no or multiple Head of Households)	0%	**0%**
Overlapping Enrollments	3%	**0%**
Funding Source Errors	0%	**0%**

Consistency

Consistency is the degree to which all the data is collected, entered, stored and reflective of the use of HMIS. Consistency ensures that data is understood, collected and entered in the same manner across all programs in the Nevada Statewide HMIS.

Monitoring and Reporting

The purpose of data quality monitoring is to ensure that the agreed-upon data quality thresholds and benchmarks are met to the greatest extent possible, and that data quality issues are quickly identified and resolved. The CoC recognizes that the data produced from HMIS is critical to meet the reporting and compliance of HUD requirements within individual agencies, as the CoC as a whole, and as federally required.

Agency Data Quality Monitoring

There are tools to assist Agencies in data quality monitoring in HMIS. The reports below, found in the Data Quality Report section of HMIS, help identify data quality issues and should be reviewed regularly.

NAME OF REPORT	PURPOSE OF REPORT	RECOMMENDED REVIEW FREQUENCY
[HUDX-227] Annual Performance Report	Provides a series of tables with questions about service levels and outcomes for the project	Monthly
[HUDX-225] HMIS Data Quality Report	Reviews data quality across a number of HMIS data elements	Monthly
[DQXX-103] Monthly Staff Report	Provides three categories of information: • General data quality • User Activity (including the number of clients, [both existing and new] that each staff member worked with during the time frame of report)	Monthly

NAME OF REPORT	PURPOSE OF REPORT	RECOMMENDED REVIEW FREQUENCY
	• Data quality by data element (e.g. Date of Birth, Race and Ethnicity, Veteran Status, etc.) for all clients served	
[DQXX-102] Program Data Review	Provides a list of client enrollments and their time in the program, and highlights data quality problems.	Monthly
[DQXX-110] Duplicate Clients	Identifies client records that have matching Personal IDs.	Monthly

General Data Quality Monitoring

When data quality thresholds and benchmarks are met, reporting will be more reliable and can be used to evaluate service delivery, project design, effectiveness, and efficiency of the system. All HMIS participating agencies are expected to meet the data quality thresholds and benchmarks described in this document. To achieve this, HMIS data quality will be monitored and reviewed in accordance with the schedule outlined in this section. All data quality monitoring will be conducted by the HMIS Lead in partnership and/or the CoC Coordinator with the System Administrator with the full support of the CoC.

Routine data quality monitoring reports reflect data for a specified ninety (90) days prior to the report. Data quality monitoring reports are rotated on a monthly basis to ensure review of various data quality measures (e.g., overlapping enrollments, head of household issues) throughout the quarter. HMIS participating agencies must review and correct the data quality issues within the specified timeframe.

As data is reviewed and monitored through various projects and initiatives, there may be instances where non-regularly monitored data may require review and corrections by HMIS participating agencies. HMIS participating agencies must review and correct the data quality issues within the specified timeframe.

Federal Reporting and Data Quality Monitoring

Additional data quality monitoring and reviews will be conducted in preparation for submission of federally mandated reporting to HUD in accordance with the following preparation and submission schedule:

TIMELINE	SYSTEM ADMINISTRATOR	HMIS PARTICIPATING AGENCY	APPROVED SUBMITTER
Two (2) months before draft	Begin project setup review, focus on inventory and project changes	Begin data quality reviews, focusing on ensuring the correct number of persons	Provide support as needed.

submission due date	throughout the year. Make corrections as needed. Update housing inventory as appropriate.	are enrolled and there are no null/missing/don't know/refused values. Make corrections as needed.	
One (1) month before draft submission due date	Run report drafts, identify issues and/or discrepancies from previous year, including utilization. Notify agencies as needed.	Review data with relevant program managers and/or staff to verify accuracy of data compared with other person records.	Provide support as needed.
Two (2) weeks before draft submission due date	Enter data into HDX and address validation issues as needed.		Provide support as needed.
Two (2) weeks before final data submission due date	Review draft data with Authorized Submitter staff as needed and confirm the final data in HDX 2.0.		Provide support as needed.
Prior to submission deadline			Review and submit the final data in HDX 2.0.

Longitudinal Systems Analysis (LSA)

The Longitudinal Systems Analysis (LSA) provides HUD and CoCs with critical information about how people experiencing homelessness use their system of care and includes such data as the demographic characteristics of homeless persons, service use patterns, and the CoC's capacity to house homeless persons. The LSA reporting period is October 1 through September 30.

Approximate draft due date: October 31
Approximate final due date: December 1

System Performance Measures (SPMs)

HUD System Performance Measures (SPMs) are a tool used to measure the local homeless assistance as a coordinated system rather than individual projects and funding sources. HUD will use the system-level performance information as a competitive element in its annual CoC Program Competition and to gauge the state of the homeless assistance system nationally. The SPM reporting period is October 1 through September 30.

Approximate draft due date: October 31
Approximate final due date: December 1

Housing Inventory Count (HIC)

The Housing Inventory Count (HIC) is a comprehensive inventory of all housing that is dedicated to serving homeless and formerly homeless individuals and families within a CoC. All year-round, seasonal, and temporary beds/units should be counted in the HIC.

HIC date: On a date in the last ten (10) days of January
Approximate due date: April 30

Point-in-Time (PIT) Count

The Point-in-Time (PIT) count is a count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that CoCs conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night.

PIT date: On a date in the last ten (10) days of January
Approximate due date: April 30

Annual CoC Application to HUD

The three Nevada CoCs compete in an annual national competition for HUD Continuum of Care Program funds [e.g. Notice of Funding Opportunity (NOFO)]. System-wide APR data is required as part of that application, as is aggregate data for all projects receiving CoC funding.

Approximate due date: September 1 - September 30

The CoC Lead Entity will review the HDX Competition Report, and the System Administrator will provide technical assistance as needed to evaluate issues.

Quarterly Performance Report (QPR)

HUD may require grantees to submit an QPR electronically to HUD every operating quarter. QPRs are submitted through HUD's Sage HMIS Reporting Repository. Recipients must follow HUD's instructions for data collection, formatting, and upload, aligning with the latest HMIS Data Standards. Reports are due thirty (30) days following the end of the reporting period. Due dates are listed in Sage.

Preparation and submission schedule:

- Two (2) months before due date: Agencies will begin data quality reviews, focusing on ensuring the correct number of persons are enrolled and there are no null/missing/don't know/refused values. Agencies will make corrections to data in HMIS as needed.
- One (1) month before due date: Agencies will review data with relevant program managers and/or staff to verify accuracy of data compared to other records and make corrections to data in HMIS as needed.
- Three (3) weeks before due date: Agencies will conduct an internal review of the data in HMIS prior to uploading the data into Sage to verify accuracy.
- Two (2) weeks before due date: Agencies will upload QPR data into Sage.

Annual Performance Report (APR)

HUD requires grantees to submit an APR electronically to HUD every operating year. APRs are submitted through HUD's Sage HMIS Reporting Repository. Recipients must follow HUD's instructions for data collection, formatting, and upload, aligning with the latest HMIS Data Standards. Reports are due ninety (90) days following the end of the reporting period. Due dates are listed in Sage.

Preparation and submission schedule:

- Four (4) months before due date: Agencies will begin data quality reviews, focusing on ensuring the correct number of persons are enrolled and there are no null/missing/don't know/refused values. Agencies will make corrections to data in HMIS as needed.
- Three (3) months before due date: Agencies will review data with relevant program managers and/or staff to verify accuracy of data compared to other records and make corrections to data in HMIS as needed.
- Two (2) months before due date: Agencies will conduct an internal review of the data in HMIS prior to uploading the data into Sage to verify accuracy.
- Forty-five (45) days before due date: Agencies will upload APR data into Sage.

Performance Monitoring

Performance Monitoring is the review of outcomes or results of federally funded projects and services provided. Thresholds and benchmarks of performance monitoring are set by the respective CoC and may include data quality thresholds and benchmarks as a component of performance monitoring plans. Federally funded projects may receive performance improvement plans as a result of performance monitoring.

Encouragement and Enforcement

All HMIS participating agencies must ensure the minimum thresholds and benchmarks outlined in this document are fulfilled for every project utilizing HMIS. To ensure that HMIS participating agencies meet the minimum data entry standards set forth herein, the following encouragements and enforcements will be used:

1. CoCs provide funding for HMIS licenses to participating agencies to encourage participation, bed coverage, and data entry.
2. Agencies that meet the data quality benchmarks are periodically recognized by the CoC.
3. The CoC may use data quality benchmarks in the local competition as part of scoring and ranking process to make funding decisions.
4. A copy of this Data Quality Plan is made available to the general public by posting to the HMIS Lead and System Administrator's website.
5. Sample entry, annual update and exit forms are posted to the System Administrator's website.
6. The HMIS Lead in partnership with the System Administrator provide data quality reports to HMIS participating agencies in accordance with the data quality monitoring schedule

described in the “Monitoring and Reporting” section to facilitate compliance with the minimum threshold and benchmarks.

7. Members of the Nevada Statewide HMIS Subcommittee may provide a brief update on progress related to data quality monitoring and reporting at the regularly scheduled CoC meetings.
8. HMIS participating agencies that do not adhere to the minimum data quality thresholds set forth herein are notified of their deficiencies and provided with specific information regarding the nature of the deficiencies and methods by which to correct them.
   a) HMIS participating agencies will be given a specified amount of time to correct any data quality issues identified.
   b) Training is offered to agencies that remain noncompliant with the minimum data entry thresholds.
   c) HMIS participating agencies that fail to meet the data quality thresholds may be asked to submit a written plan that details how they will take corrective action.
      1. The plan will be submitted to, and monitored by, appropriate members of the Nevada Statewide HMIS Subcommittee.
      2. Should the problem persist, the Nevada Statewide HMIS Subcommittee may make a recommendation to suspend the agency’s ability to enter data into the HMIS and will contact any appropriate state and federal funders.
   d) Failure to adhere to the minimum data quality thresholds may result in progressive corrective action plans up to and including removal of individuals or the HMIS participating agency from HMIS.