



DEPARTMENT OF
HOMELESSNESS AND
SUPPORTIVE HOUSING

San Francisco Online Navigation and Entry (ONE) System

Continuous Data Quality Improvement Process



San Francisco Online Navigation and Entry (ONE) System

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Data Quality Defined

Data quality is a term that refers to the reliability and validity of client-level data in the ONE System. It is measured by the extent to which data in the system reflects actual information in the real world. With good data quality, a community can accurately tell its story of the individuals and families it serves.

Overview of Data Quality Continuous Improvement Process

A continuous data quality improvement process facilitates the ability of the ONE System to achieve statistically valid and reliable data. It sets expectations for both the community and the end users to capture reliable and valid data on persons accessing programs and services.

Roles & Responsibilities

Bitfocus will provide the following services to assist agencies in correctly entering data in the ONE System, and in addressing data quality issues:

- Provide end user trainings and workflow documents.
- Work with agency management to identify at least one agency employee as a ONE System Agency Lead.
- Produce data quality reports and information on how to correct any identified data quality issues.
- Provide technical assistance to agencies requesting assistance in identifying what steps need to be taken in order to correct data quality issues.
- Provide other services as contracted with the ONE System and/or agency.

Agencies will take primary responsibility for entering, verifying, and correcting data entry:

- Agency staff will measure completeness by running APRs and other reports, then distribute those reports to staff tasked with improving data completeness.
- It is the responsibility of Agency management to ensure staff tasked with correcting data quality issues do so in a timely manner.



User Access and Security

New ONE System user accounts may be requested by the Agency Lead. All users must complete the SFDPH Privacy Training and Clarity General Training in order to be granted system access. Agency Leads are responsible for the following security tasks:

- **Authorizing new ONE System accounts.** Agency Leads should determine the appropriate level of access based on a user's job role and client privacy needs. Requests for new user accounts may be submitted directly to Bitfocus by the Agency Lead.
- **Deactivating user accounts.** When users leave an agency, Agency Leads must submit a request to Bitfocus to deactivate their account within one (1) work day.
- **Access role changes.** If a user's job role changes and they need a different access level, the Agency Lead should notify Bitfocus within one (1) work day of the appropriate change.

Data Quality Standards

There are three general types of programs, each with a set of data elements that are required for every adult client. All required elements, regardless of program type, must have 0% Null rates.

Timeline

Data quality reports should be run at least once per month throughout the year. In the weeks prior to submitting a report (e.g.: Annual Homeless Assessment Report), data quality reports may need to be run on a daily basis.

Data Completeness

No Null (missing) data for required data elements. Don't Know or Refused responses should not exceed the allowed percentages (see below for details).



Transitional Housing, Rapid Rehousing, and Permanent Supportive Housing

Data Element	Applies to:	Don't Know/Refused Should Not Exceed			
		Baseline (9/6/17)	Year 1 Target (9/30/18)	Year 2 Target (9/30/19)	Year 3 Target (9/30/20)
Name	All Clients	29%	20%	10%	5%
SSN	All Clients	n/a	n/a	n/a	n/a
Date of Birth	All Clients	4%	5%	5%	5%
Race	All Clients	n/a*	n/a*	n/a*	5%
Ethnicity	All Clients	1%	5%	5%	5%
Gender	All Clients	1%	5%	5%	5%
Veteran Status	Adults Only	30%	20%	10%	5%
Location Prior to Program Entry	Adults & Head of Household	29%	20%	10%	5%
Income and Sources (at entry)	Adults & Head of Household	26%	15%	5%	5%
Income and Sources (update)	Adults & Head of Household	91%**	40%**	20%**	5%**
Income and Sources (at exit)	Adults & Head of Household Leavers	5%	5%	5%	5%
Disabling Condition	All Clients	19%	10%	5%	5%
Domestic Violence	Adults & Head of Household	37%	25%	15%	5%
Destination	Adults & Head of Household Leavers	10%	10%	10%	10%

**May be impacted by pending data migration. Once resolved data migration has been resolved, these standards may be revised.

Adult Emergency Shelter



Data Element	Applies to:	Don't Know/Refused Should Not Exceed			
		Baseline (9/6/17)	Year 1 Target (9/30/18)	Year 2 Target (9/30/19)	Year 3 Target (9/30/20)
Name	All Clients	10%	5%	5%	5%
SSN	All Clients	n/a	n/a	n/a	n/a
Date of Birth	All Clients	10%	5%	5%	5%
Race	All Clients	n/a*	n/a*	n/a*	5%
Ethnicity	All Clients	3%	5%	5%	5%
Gender	All Clients	1%	5%	5%	5%
Veteran Status	Adults Only	11%	7%	5%	5%
Location Prior to Program Entry	Adults & Head of Household	8%	8%	8%	5%
Income and Sources (at entry)	Adults & Head of Household	10%	5%	5%	5%
Income and Sources (update)	Adults & Head of Household	100%**	40%**	20%**	5%**
Income and Sources (at exit)	Adults & Head of Household Leavers	4%	5%	5%	5%
Disabling Condition	Adults Only	28%	20%	10%	5%
Domestic Violence	Adults & Head of Household	21%	10%	5%	5%
Destination	Adults & Head of Household Leavers	17%	10%	5%	10%

**May be impacted by pending data migration. Once resolved data migration has been resolved, these standards may be revised.

Family Private Room Shelter



Data Element	Applies to:	Don't Know/Refused Should Not Exceed			
		Baseline (9/6/17)	Year 1 Target (9/30/18)	Year 2 Target (9/30/19)	Year 3 Target (9/30/20)
Name	All Clients	1%	5%	5%	5%
SSN	All Clients	n/a	n/a	n/a	n/a
Date of Birth	All Clients	1%	5%	5%	5%
Race	All Clients	n/a*	n/a*	n/a*	5%
Ethnicity	All Clients	5%	5%	5%	5%
Gender	All Clients	0%	5%	5%	5%
Veteran Status	Adults Only	2%	5%	5%	5%
Location Prior to Program Entry	Adults & Head of Household	25%	15%	10%	5%
Income and Sources (at entry)	Adults & Head of Household	1%	5%	5%	5%
Income and Sources (update)	Adults & Head of Household	100%**	40%**	20%**	5%**
Income and Sources (at exit)	Adults & Head of Household Leavers	0%	5%	5%	5%
Disabling Condition	Adults Only	66%	40%	20%	5%
Domestic Violence	Adults & Head of Household	13%	7%	5%	5%
Destination	Adults & Head of Household Leavers	0%	10%	10%	10%

**May be impacted by pending data migration. Once resolved data migration has been resolved, these standards may be revised.

Street Outreach/Drop-in Center



Data Element	Applies to:	Don't Know/Refused Should Not Exceed			
		Baseline (9/6/17)	Year 1 Target (9/30/18)	Year 2 Target (9/30/19)	Year 3 Target (9/30/20)
Name	All Clients	4%	5%	5%	5%
SSN	All Clients	n/a	n/a	n/a	n/a
Date of Birth	All Clients	2%	5%	5%	5%
Race	All Clients	n/a*	n/a*	n/a*	5%
Ethnicity	All Clients	17%	10%	5%	5%
Gender	All Clients	8%	5%	5%	5%
Veteran Status	Adults Only	44%	35%	20%	5%
Location Prior to Program Entry	Adults & Head of Household	1%	5%	5%	5%
Income and Sources (at entry)	Adults & Head of Household	61%	50%	40%	30%
Income and Sources (update)	Adults & Head of Household	0%	5%	5%	5%
Income and Sources (at exit)	Adults & Head of Household Leavers	92%	80%	65%	50%
Disabling Condition	Adults Only	62%	40%	20%	5%
Domestic Violence	Adults & Head of Household	99%	80%	65%	50%
Destination	Adults & Head of Household Leavers	89%	70%	55%	40%

**May be impacted by pending data migration. Once resolved data migration has been resolved, these standards may be revised.

Program Exits



Clients will be automatically exited from the program after set period of days of zero activity (update assessments, services, etc.). This feature eliminates the possibility that a client who is no longer active in the program remains enrolled.

- The zero-activity thresholds for the following groups are:
 - Adult emergency shelter: Ninety (90) days.
 - Family private room shelter: One hundred-eighty (180) days.
 - Street outreach/Drop-in Centers: Ninety (90) days.

Minimizing Data Quality Issues

How you can minimize data quality issues:

Enter client data in ONE as soon as possible. The more time that elapses between collecting data and entering the data in the ONE System, the greater the odds there will be data quality issues.

- Recommended time frames:
 - Transitional and Permanent Housing Programs: Enter all program entry/exit data within three (3) work days.
 - Emergency Shelters and non-HUD programs: Enter check in/check out within one (1) work day
 - Outreach: Create client profile, if necessary, within three (3) work days. Record outreach services within one (1) work day.
- Whenever possible, consider entering data as it is being collected during client interactions so that clients may help identify potential inaccuracies.
- Review Data Quality using APRs at least once a month. Correct all null values as soon as possible.

When to Correct Data Quality Issues

At a minimum, you should begin correcting data quality issues at least two (2) months before a report is submitted to the agency requesting the report.

In general, you should evaluate and correct data quality quarterly using the following schedule:



- **First month of quarter:** begin data quality review, focused on ensuring the correct number of clients are enrolled and there are no null values. Make corrections as needed. For example, ensure that no required information, such as veteran status, is missing.
- **Second month of quarter:** review data with relevant program managers and/or staff to verify accuracy of data compared other records. For example, ensure that veteran status data entered into the ONE System is correct.
- **Third month of quarter:** assess agency workflow to identify process improvements that may help ensure high quality data is consistently entered into the system.

Correcting Data Quality Issues

The following reports identify the majority of data quality issues:

- [HUDX-226] Annual Performance Report [2017]
- [HUDX-225] HMIS Data Quality Report
- [DQXX-102] Program Data Review
- [DQXX-103] Monthly Staff Report
- [DQXX-105] Monthly Agency Utilization Report
- [DQXX-110-AD] Duplicate Clients
- [DQXX-120-AD] Project Households with issues in HoH determination
- [EXIT-101] Potential Exits

Annual Homeless Assessment Report (AHAR)

[HUDX-202] Program Based Annual Homeless Assessment Report [AHAR]

Annual Performance Review (APR)

Preparation and submission schedule:

- **Two (2) months before due date:** begin data quality review, focused on ensuring the correct number of clients are enrolled and there are no null values. Make corrections as needed. For example, ensure that no required information, such as veteran status, is missing.



- **One (1) month before due date:** review data with relevant program managers and/or staff to verify accuracy of data compared other records. For example, ensure that veteran status data entered into ONE System is correct.
- **Two (2) weeks before due date:** enter data into SAGE.
- **One (1) week before due date:** conduct internal review of data entered into SAGE to verify accuracy.

Glossary of Terms

Term	Explanation
AHAR or Annual Homeless Assessment Report	A HUD report to the U.S. Congress that provides nationwide estimates of homelessness, including information about the demographic characteristics of homeless persons, service use patterns, and the capacity to house homeless persons.
APR or Annual Performance Report	Recipients with HUD funding received through Continuum of Care homeless assistance grants (e.g., Supportive Housing Program, Shelter Plus Care, Section 8 Moderate Rehabilitation Single Room Occupancy Program, CoC Program) are required to submit an Annual Performance Report (APR) electronically to HUD every operating year.