## Data quality information — Homelessness services, chapter 18

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| Data quality information |
| Data quality information (DQI) provides information against the seven ABS data quality framework dimensions. DQI for Homelessness services performance indicators will be progressively introduced in future reports. Technical DQI has been supplied by relevant data providers. Additional Steering Committee commentary does not necessarily reflect the views of data providers.  Where Report on Government Services reporting aligns with National Agreement reporting, similar data quality information is included in the Steering Committee’s reports on National Agreements to the COAG Reform Council. |
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DQI is available for the following data collections and performance indicators:

Specialist homelessness services client collection 2

Performance indicators 5

Access to specialist homelessness services by clients with disability 5

Clients experiencing repeat periods of homelessness 7

## Data collection

### Specialist homelessness services client collection

Data quality information for this data collection has been drafted by the Australian Institute of Health and Welfare (AIHW), with additional Steering Committee comments.

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| **Indicator definition and description** | |
| **Element** | Various |
| **Indicator** | Various. |
| **Measure (computation)** | Various |
| **Data source/s** | Specialist Homelessness Services Client Collection (SHSC)  The SHSC collects information on people who receive services from agencies that are funded under the NAHA or the NPAH to provide specialist homelessness services. A limited amount of data is also collected about clients who seek, but do not receive, assistance from a specialist homelessness agency. Data are collected monthly from agencies participating in the collection. |
| **Data Quality Framework Dimensions** | |
| **Institutional environment** | The AIHW is an Australian Government statutory authority accountable to Parliament and operates under the provisions of the Australian Institute of Health and Welfare Act 1987. This Act ensures that the data collections managed by the AIHW are kept securely and under strict conditions with respect to privacy and confidentiality. More information about the AIHW is available on the AIHW website (www.aihw.gov.au).  The AIHW receives, compiles, edits and verifies data in collaboration with jurisdictions, which retain ownership of the data and must approve any jurisdiction level output before it is released. The finalised data sets are used by the AIHW for collation, reporting and analysis. |
| **Relevance** | **Scope and coverage―clients**  The SHSC collects information about clients of specialist homelessness agencies, that is, people who receive assistance from agencies funded by state and territory governments to respond to or prevent homelessness. In addition, some information is also collected about unassisted people, that is, any person who seeks services from a specialist homelessness agency and does not receive any services at that time.  SHSC data does not cover all homeless people and those at risk of homelessness, rather it captures those who seek assistance from an SHS agency.  Not everyone in scope for SHSC is homeless, because specialist homelessness agencies provide services to people who are at risk of homelessness aimed at preventing them from becoming homeless, as well as to people who are currently homeless.  Data about clients is submitted based on support periods―a period of support provided by a specialist homelessness service agency to a client. Information about clients is then linked together based on a statistical key (see ‘Statistical Linkage Key (SLK) validity’ below).  A client may be of any age—children are clients if they receive specialist homelessness assistance.  **Scope and coverage―agencies**  The SHSC collects information on people who seek and receive services from specialist homelessness agencies. All agencies that receive funding under the NAHA or NPAH to provide specialist homelessness services are in scope for the SHSC in general, but only those who received funding for at least four months during the 2013–14 financial year are in scope for the 2013–14 reporting period. Agencies that are in coverage are those in-scope agencies for which details have been provided to the AIHW by the relevant state/territory department.  Of the agencies expected to participate in the collection in at least one month during the 2013-14 reporting period, 96.2 per cent of agencies provided data for each month where they were expected to participate, 2 per cent provided data for some but not all of the months where data was expected, and just under 1.8 per cent failed to provide data for any month. |
| **Timeliness** | The SHSC began on 1 July 2011. Specialist homelessness agencies provide their data to the AIHW each month, once sufficient data is received and validated ‘snapshots’ are created at particular points in time for reporting purposes. The 2013–14 snapshot contains data submitted to the AIHW for the July 2013 to June 2014 collection months, using responses received and validated as at 10 August 2014. |
| **Accuracy** | **Potential sources of error**  As with all data collections, the SHSC estimates are subject to error. These can arise from data coding and processing errors, inaccurate data or missing data. Reported findings are based on data reported by agency workers.  **Data validation**  The AIHW receives data from specialist homelessness agencies every month. These data go through two processes of data validation (error checking). Firstly, data validation is incorporated into the client management systems (CMSs) most agencies use to record their data. Secondly, data are submitted through the AIHW online reporting web-portal, Specialist Homelessness Online Reporting (SHOR). SHOR completes a more thorough data validation and reports (to staff of the homelessness agency) any errors that need correcting before data can be accepted.  **Statistical Linkage Key (SLK) validity**  An individual client may seek or receive support on more than one occasion—either from the same agency or from a different agency. Data from individual clients who presented at different agencies and/or at different times is matched based on a statistical linkage key (SLK) which allows client level data to be created. The SLK is constructed from information about the client’s date of birth, sex and an alphacode based on selected letters of their name.  If a support period record does not have a valid SLK, it cannot be linked to a client, and thus it is not included in client-level tables (although it is included in support period-level tables). Ninety-four per cent of support periods had a valid SLK in 2013–14.  **Incomplete responses**  In many support periods, in 2013–14, valid responses were not recorded for all questions—invalid responses were recorded, ‘don’t know’ was selected, or no response was recorded. Support periods with invalid/’don’t know’/missing responses were retained in the collection and, no attempt was made to deduce or impute the true value of invalid/’don’t know’/missing responses.  Where data relate to the total population, the estimate includes clients with missing information. This information has been attributed in proportion with those clients for whom information is available. In tables where the population relates to clients with a particular need or accommodation circumstance, clients with missing needs information are excluded.  **Non-response bias**  Non-response occurs where there is less than 100 per cent agency participation, less than 100 per cent SLK validity and where there are incomplete responses. However estimates will not necessarily be biased. If the non-respondents are not systematically different in terms of how they would have answered the questions, then there will be no bias. However, no information is yet available to indicate whether or not there is any systematic bias in agency non-participation, SLK validity and incomplete responses.  **Imputation**  An imputation strategy is used to correct for two types of non-sampling error: agency non-response and data error in the statistical linkage key data item, which is used to link information about individual clients together to provide a complete picture for that client.  This strategy has two parts. The first part addresses agency non-response by using both explicit and implicit imputation and results in agency weights and some explicitly imputed service period records and end dates. The second part addresses the impact of invalid statistical linkage keys (SLKs) on the total number of clients and results in client weights.  Agencies that are out of scope for 9 months in 2013–14 are deemed to be out of scope for the whole period and excluded from all calculations. |
| **Coherence** | The SHSC replaces the SAAP NDC, which began in 1996. The SHSC differs from the SAAP NDC in many respects.  The major definitional differences between SAAP and SHSC relate to the capture of information about children and support. In the SAAP NDC, children who accompanied a parent or guardian were counted as accompanying children (with only limited information collected); in the SHSC, children are included as clients (in their own right) if they directly receive a service. In SAAP, support was considered to entail generally 1 hour or more of a worker’s time; in SHSC no time-related condition exists. |
| **Accessibility** | Results are published on the AIHW website. Data not available online or in reports can be requested via the online customised data request system https://datarequest.aihw.gov.au; or obtained from the Communications, Media and Marketing Unit on (02) 6244 1032 or via email to info@aihw.gov.au . Data requests are charged on a cost-recovery basis. |
| **Interpretability** | Information on the development of the SHSC, definitions and concepts, and collection materials and processes can be found on the AIHW website, <www.aihw.gov.au>. Information on definitions, concepts and classifications can also be found in the SHSC’s collection manual (AIHW 2011). |
| **Data Gaps/Issues Analysis** | |
| **Key data gaps/ issues** | The Steering Committee notes the following key data gaps/issues:   * The key data quality issue related to the use of the specialist homelessness services data is relevance. The data do not capture the whole of the homeless (and at risk) population, rather only people who access specialist homelessness services. |

### Access to specialist homelessness services by people with disability

Data quality information for this data collection has been drafted by the AIHW, with additional Steering Committee comments.

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| **Indicator definition and description** | |
| **Element** | Equity – access |
| **Indicator** | *Access to Specialist Homelessness Services by people with disability* |
| **Measure (computation)** | Definition: The proportion of SHS clients who identified as having a long-term health condition or disability who needed assistance with core activities and whose need for accommodation or services other than accommodation were met.  Derivation: A client is defined as having a need for assistance with core activities if at any time during their support period in the reporting year the client indicated that he/she ‘Always/sometimes need help and/or supervision’ with self-care, mobility or communication.  Numerator: the number of clients where the client needed assistance with core activities, and whose needs for accommodation or services other than accommodation were met.  Denominator: Total number of clients who sought assistance from SHS services whose needs for accommodation or services other than accommodation were met. |
| **Data source/s** | Specialist Homelessness Services Client Collection.  The SHSC collects information on people who receive services from agencies that are funded under the NAHA or the NPAH to provide specialist homelessness services. A limited amount of data is also collected about clients who seek, but do not receive, assistance from a specialist homelessness agency. Data are collected monthly from agencies participating in the collection. |
| **Data Quality Framework Dimensions** | |
| **Institutional environment** | See General SHSC DQI. |
| **Relevance** | The SHSC collects information about clients of specialist homelessness agencies, that is, people who receive assistance from agencies funded by state and territory governments to respond to or prevent homelessness. Consequently, SHSC data does not capture disability information for unassisted persons. Data may not be complete for all clients who are assisted. |
| **Timeliness** | This indicator sources data from the SHSC submitted to the AIHW for the July 2013 to June 2014 collection months, using responses received and validated as at 10 August 2014. |
| **Accuracy** | Missing Data  The question pertaining to disability was included for the first time in July 2013. The question was asked of new clients and existing client information was progressively updated through the year. Only 54 per cent of clients had this information at the end of the first quarter, and this increased progressively to 78 per cent of clients by the end of the last quarter. The 12 month average response rate was 65 per cent.   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **National: Response rates for the question on disability impacting core activities** | | | | | | | | | | | | | | | |  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | Avg of 12 mths | Avg of 3 mths | | Propn Need help % | 11.9 | 11.4 | 11.0 | 10.6 | 10.5 | 10.3 | 9.9 | 9.7 | 9.4 | 9.5 | 9.5 | 9.4 | 10.3 | 9.5 | | Propn Need Help or use aid % | 40.3 | 49.4 | 53.7 | 57.9 | 61.4 | 64.4 | 67.4 | 71.2 | 75.8 | 77.4 | 77.9 | 78.0 | 64.6 | 77.8 | | Valid response rate % | 59.7 | 50.6 | 46.3 | 42.1 | 38.6 | 35.6 | 32.6 | 28.8 | 24.2 | 22.6 | 22.1 | 22.0 | 35.4 | 22.2 | |
| **Coherence** | From 2013, the SHSC commenced collecting information on whether, and to what extent, a long term health condition or disability restricts core activities for the client. The information is consistent with data collected in the 2011 Census and the 2014 National Social Housing Survey. Questions are based on the Core Activity Need for Assistance concept first used in the 2006 Census to identify people with a 'profound or severe core activity limitation' using similar criteria to the ABS’s Survey of Disability, Ageing and Carers (SDAC). This population is defined as people with a disability who need assistance in their day to day lives with any or all of the following core activities self–care, body movements or communication.  These data were not collected in previous years. |
| **Accessibility** | See General SHSC DQI. |
| **Interpretability** | See General SHSC DQI. |
| **Data Gaps/Issues Analysis** | The Steering Committee notes the following key data gaps/issues:  Data from the SHSC to enumerate this measure primarily concerns clients with need for assistance in core activities of daily living, such as self-care, mobility and communication and do not measure the total number of people with a disability accessing specialist homelessness services. Consequently, the indicator may under-represent clients with a disability who need support to access and maintain housing. |
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**Clients experiencing repeat periods of homelessness**

Data quality information for this data collection has been drafted by the AIHW.

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| **Indicator definition and description** | |
| **Element** | Outcomes |
| Indicator | *Clients experiencing repeat periods of homelessness*  This is a proxy measure as it only captures homelessness people who access specialist homelessness services rather than all those in the population who experience homelessness.  ‘Homeless’ definition: A client is defined as being homeless in each month where at least one of the following describes their housing situation:   * *dwelling type* is caravan, tent, cabin, boat, improvised building/dwelling, no dwelling/street/park/in the open, motor vehicle, boarding/rooming house, emergency accommodation, hotel/motel/bed and breakfast * *tenure type* is renting or living rent free in any of transitional housing, caravan park, boarding/rooming house, or emergency accommodation/night shelter/women's refuge/youth shelter; OR if the client has no tenure * *conditions of occupancy* is Couch surfer   ‘Not Homeless’ definition: A client is defined as being “not homeless” in each month where they have provided a response and none of the above conditions are met.  Regardless of tenure or conditions of occupancy, a client is not considered to be homeless if the dwelling type is reported as ‘Institution’ in one of these categories:   * hospital (excluding psychiatric) * psychiatric hospital/unit * disability support * rehabilitation * adult correctional facility * youth/juvenile justice correctional centre * boarding school/residential college * aged care facility * immigration detention centre |
| **Measure (computation)** | Definition: Proportion of people experiencing repeat periods of homelessness  Numerator: number of SHS clients who change status from ‘homeless’ to ‘not homeless’ and back to ‘homeless during the reporting period.’  Denominator: number of SHS clients who experienced homelessness at any time during the reporting period.  Computation: Presented as a *proportion*. |
| **Data source/s** | AIHW — Specialist Homelessness Services collection (SHSC). |
| **Data Quality Framework Dimensions** | |
| **Institutional environment** | See General SHSC DQI. |
| **Relevance** | SHSC data does not cover all homeless people but only those who seek assistance from an SHS agency. The financial year is the time frame for the indicator. By only counting homeless people within a financial year, persons who had multiple periods of homelessness spanning different financial years may fall outside of the scope for the indicator. |
| **Timeliness** | See General SHSC DQI. |
| **Accuracy** | The repeat homelessness indicator relies on an assessment of the homelessness status of clients in each month where they are supported by SHS agencies. This assessment is based on the dwelling type, tenure type and conditions of occupancy reported for the client in each month, and the total number of clients is estimated from those records where the required data is available. In 2013-14, 47,395 clients or nearly 19% of clients were excluded from the derivation of the repeat homelessness indicator due to missing data.   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Proportion of not stated for homelessness** | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  | |  | **NSW** | **Vic** | **Qld** | **WA** | **SA** | **Tas** | **ACT** | **NT** | **Aust** | | Homeless not stated | 8948 | 21378 | 3434 | 5436 | 5359 | 736 | 765 | 1539 | 47395 | | Per cent not stated | 17.3 | 21.4 | 7.8 | 25.4 | 24.7 | 11.1 | 14.3 | 21.6 | 18.7 | | Total clients | 51786 | 99892 | 43751 | 21437 | 21655 | 6614 | 5338 | 7123 | 254001 |   *State/Territory specific issues*:  South Australia  Improvements to the recording of housing status were introduced in SA in July 2013. This improvement initially increased the proportion of clients with housing status recorded as ‘unknown,’ with this proportion progressively decreasing throughout the 2013-14 financial year. This has resulted in the measure of repeat homelessness being overstated for the year. |
| **Coherence** | Both the numerator and the denominator are drawn from the SHSC and have been produced using the same estimation methods.  The denominator has been defined as the total number of SHS clients who experienced homelessness at any time during the financial year reference period as it is the measure that will provide the most reliable comparison with the indicator numerator. |
| **Accessibility** | See General SHSC DQI. |
| **Interpretability** | See General SHSC DQI. |