

# Specialist Homelessness Services Collection, 2015–16; Quality Statement

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# Specialist Homelessness Services Collection, 2015–16; Quality Statement

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Quality Statement
<b>METEOR identifier:</b>	659136
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## Data quality

### Data quality statement summary:

#### Description

The Specialist Homelessness Services Collection (SHSC) collects information on people seeking services from agencies that receive funding under the National Affordable Housing Agreement (NAHA) or the National Partnership Agreement on Homelessness (NPAH) to provide specialist homelessness services.

#### Summary

- Data are collected monthly from agencies participating in the collection. All agencies that receive funding under the NAHA or the NPAH to provide specialist homelessness services are in scope for the SHSC, but only those expected to provide data are covered.
- Of the agencies expected to participate in the collection in at least one month during the 2015–16 reporting period, 97.5% of agencies provided data for each month where they were expected to participate, 1.9% provided data for some but not all of the months where data was expected, and 0.6% failed to provide data for any month.
- Matching of data from individual clients who presented at different agencies and/or at different times requires a valid statistical linkage key (SLK). Ninety-seven per cent of support periods had a valid SLK in 2015–16
- Nationally, the number of clients increased by 9% and total support days increased by 13% between 2014–15 and 2015–16. This was mainly due to the increase in corresponding numbers in New South Wales, thus the data should be used with caution when making comparisons of 2014–15 data with data for New South Wales and other states and territories in 2014–15.

**Institutional environment:** The Australian Institute of Health and Welfare (AIHW) is a major national agency set up by the Australian Government under the [Australian Institute of Health and Welfare Act 1987](#) to provide reliable, regular and relevant information and statistics on Australia's health and welfare. It is an independent corporate Commonwealth entity established in 1987, governed by a [management Board](#), and accountable to the Australian Parliament through the Health portfolio.

The AIHW aims to improve the health and wellbeing of Australians through better health and welfare information and statistics. The AIHW collects and reports information on a wide range of topics and issues, ranging from health and welfare expenditure, hospitals, disease and injury, and mental health, to ageing, homelessness, disability and child protection.

The AIHW also plays a role in developing and maintaining national metadata standards. This work contributes to improving the quality and consistency of national health and welfare statistics. The Institute works closely with governments and non-government organisations to achieve greater adherence to these standards in administrative data collections to promote national consistency and comparability of data and reporting.

One of the main functions of the AIHW is to work with the states and territories to improve the quality of administrative data and, where possible, to compile national datasets based on data from each state and territory, to analyse these datasets and disseminate information and statistics.

The [Australian Institute of Health and Welfare Act 1987](#), in conjunction with compliance to the [Privacy Act 1988](#), ensures that the data collections managed by the AIHW are kept securely and under the strictest conditions with respect to privacy and confidentiality.

For further information see the AIHW website [www.aihw.gov.au](http://www.aihw.gov.au).

The SHSC was developed by AIHW in conjunction with the states and territories and is administered by the AIHW. All agencies that receive funding under the National Affordable Housing Agreement (NAHA) or the National Partnership Agreement on Homelessness (NPAH) to provide specialist homelessness services are in scope for the SHSC, but only those expected to provide data are covered. Data are collected monthly from agencies participating in the collection.

**Timeliness:** The SHSC began collecting data from 1 July 2011. Specialist homelessness agencies provide their data to the AIHW each month. Once sufficient data are received and validated, 'snapshots' are created at particular points in time for reporting purposes. The 2015–16 snapshot contains data submitted to the AIHW for the July 2015 to June 2016 collection months, using responses received and validated as at 11 August 2016. Data for 2015–16 will be first published in the annual *Specialist homelessness services* report in December 2016.

**Accessibility:** Data are reported in the AIHW's annual [Specialist homelessness services](#) reports and the Productivity Commission's annual [Report on government services](#).

Users can request additional disaggregations of data which are not available online or in reports (subject to the AIHW's confidentiality policy and state and territory approval) via the AIHW's online customised data request system at <https://datarequest.aihw.gov.au>. Depending on the nature of the request, requests for access to unpublished data may also incur costs or require approval from the AIHW Ethics Committee.

General enquiries about AIHW publications can be made to the Digital and Media Communications Unit on (02) 6244 1026 or via email to [info@aihw.gov.au](mailto:info@aihw.gov.au).

**Interpretability:** Information on the development of the SHSC, definitions and concepts, and collection materials and processes can be found on the AIHW website: <http://www.aihw.gov.au/shsc/>. Information on definitions, concepts and classifications can also be found in the [Specialist Homelessness Services collection manual](#).

**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.

The SHSC does not include 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 the 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 are 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 linkage 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. Agencies that are in coverage are those in-scope agencies for which details have been provided to the AIHW by the relevant state or territory government department.

Of the agencies expected to participate in the collection in at least one month during the 2015–16 reporting period, 97.5% of agencies provided data for each month where they were expected to participate, 1.9% provided data for some but not all of the months where data was expected, and just under 0.6% failed to provide data for any month.

Nationally, a small number of service providers are excluded from the collection's coverage (and are not expected to participate) for a number of reasons including that agencies do not see clients directly but support other SHS agencies (for example, property maintenance), levels of funding are such that reporting is impracticable, or agencies whose method of service delivery does not allow for case management (such as soup kitchens).

**Accuracy:****Potential sources of error**

As with all data collections, the SHSC estimates are subject to errors. 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.

**Agency participation**

Of all the agencies expected to participate for at least one month in the collection, 97.5% submitted information for each collection month where they were expected to participate, 1.9% provided data for some but not all months where data was expected, and 0.6% failed to provide data for any month.

**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 are matched based on an 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-seven per cent of support periods had a valid SLK in 2015–16.

### **Incomplete responses**

In many support periods, 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% agency participation, less than 100% SLK validity and where there are incomplete responses. However, estimates which include imputation for the missing data will not necessarily be biased if the non-respondents are not systematically different in terms of how they would have answered the questions. As agency response rate and SLK validity rate are very high, minimal non-response bias is anticipated.

### **Imputation**

An imputation strategy is used to correct for two types of non-sampling error: agency non-response and errors in the SLK data item. The SLK 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 SLKs on the total number of clients and results in client weights.

Agencies that are out of scope for less than 4 months in 2015–16 are excluded from all imputation calculations.

### **Coherence:**

On 1 July 2011, the SHSC replaced the Supported Accommodation Assistance Program (SAAP) National Data Collection (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 generally considered to entail 1 hour or more of a worker's time; in the SHSC no time-related condition exists.

Changes in SHSC data over time may be influenced by changes in underlying state and territory policies, programs or systems. These changes might affect the service footprint, the characteristics of priority clients, or how services work together to respond to client needs.

During the 2014–15 reporting period, changes were made to the CMS to prompt data providers to report mandatory data items. This led to a substantial improvement to data quality, in particular a decline in the number of non-response or 'missing' values for those items.

Changes also occurred in the way agencies were required to report 'main reason' and 'reasons for seeking assistance'. In addition to improvements in the CMS for these data items, wording providing a specific example of housing crisis was removed from the section relating to reason for seeking assistance in the CMS. Comparisons over time should be made with caution as the reporting of housing crisis, financial difficulties and housing affordability stress may be inconsistent between agencies. These changes in agency reporting were evident in the data from all states and territories.

Nationally, the number of clients increased by 9% and total support days increased by 13% between 2014–15 and 2015–16. This was mainly due to the increase in corresponding numbers in New South Wales, thus the data should be used with caution.

Data for clients with a disability who require assistance may not be comparable across age groups due to differences in the interpretation of the disability questions, this issue relates mainly to young children.

#### *State and territory-specific issues:*

### **New South Wales**

- The number of SHS clients in New South Wales increased by 44% from 2014–15 to 2015–16. New South Wales homelessness services underwent a period of major transition in 2014–15 that affected continuity of reporting for some service providers. These issues did not affect New South Wales data for 2015–16. The increase in client numbers in New South Wales is largely a result of the consolidation of new post-reform service models. Caution should be used when making comparisons of 2014–15 data with other years' figures for New South Wales and with data for other states and territories. Data quality issues associated with this transition will continue to be monitored in future trend analyses.
- Recent changes in homelessness policy in New South Wales include:
  - Consolidation of new service models and local partnerships following sector-wide reforms in 2014–15, including new Specialist Homelessness Services contracted through the Going Home Staying Home reforms and other recent initiatives such as the Service Support Fund and Homeless Youth Assistance Program. These changes were not fully reflected in the 2014–15 data due to mid-year implementation and the impact of the reform transition on the continuity of data collection.
  - The implementation of new access arrangements from 2014–15, including a No Wrong Door policy that requires agencies to conduct an initial assessment and make appropriate referrals for any person who is homeless or at risk of homelessness who presents to their service.

### **Queensland**

- In 2014–15, Queensland introduced a new Homelessness Information Platform (QHIP), a government-funded assessment and referral tool. The introduction of this tool included a new practice framework that required service providers to assess the needs of all presenting individuals and provide a response of some kind. This practice approach may have led to a decline in the reported number of individuals leaving a service unassisted. This decline continued in 2015–16.

### **Tasmania**

- In 2014–15, Housing Tasmania began the implementation of the Housing Connect model in order to improve access to housing and homelessness support services within Tasmania. The introduction of the Housing Connect model resulted in the creation of a number of new agencies in Tasmania. The aim of the model is to unite multiple housing and support organisations together and provide a 'no wrong door' solution for Tasmanians that require assistance. This new central intake system had a minor flow on effect on a number of data items, therefore comparisons over time should be made with caution.

### **Australian Capital Territory**

- The Australian Capital Territory closed a large agency due to a change in contract to supply these services at the end of June 2016. As a result, all existing clients of this agency had their support periods closed prior to becoming clients under the new management. This resulted in a rise in the number of closed support periods in the Australian Capital Territory between 2014–15 and 2015–16, even though the numbers of total support periods and clients declined slightly for this same period. This may affect analyses involving closed support periods for 2015–16 for the Australian Capital Territory. Accordingly, this data should be used with caution when making comparisons with past years' figures for the Australian Capital Territory or with data for other states and territories.

## Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

**Steward:** [Australian Institute of Health and Welfare](#)

**Reference documents:** Australian Institute of Health and Welfare (2016). [Specialist homelessness services report 2015–16](#). Canberra: AIHW. Viewed 15 December 2016.

## Relational attributes

**Related metadata references:** Supersedes [Specialist Homelessness Services Collection Data Quality Statement 2014-15](#)

[AIHW Data Quality Statements](#), Superseded 14/12/2016

Has been superseded by [Specialist Homelessness Services Collection, 2016–17: Quality Statement](#)

[AIHW Data Quality Statements](#), Superseded 10/12/2018