A GUIDE TO THE CONTRA COSTA DATA QUALITY DASHBOARD

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CCC DATA QUALITY DASHBOARD

This dashboard was created to track the data quality of HMIS Universal Data Elements ([1]UDE's) and [2]Program Specific Data Elements (PSDE's) in accordance with our CoC's [3]Data Quality Monitoring Plan. It analyzes the completeness, accuracy, consistency, and timeliness of records in HMIS, identifies errors, and organizes them into tables so that problem areas can be easily accessed and addressed. In addition to monitoring UDE's and PSDE's this dashboard also monitors certain components of our Coordinated Entry System, including CES enrollments, assessments, and events.

This dashboard is divided into 3 sections that focus on measuring data quality in different ways. Those measures are:

- Missing Data
    - This section measures the degree to which all required UDE's and PSDE's are known and documented. It also measures the degree to which all intake and exit data is collected and entered. Complete HMIS data is necessary to fully understand the nature and extent of homelessness.
- Accuracy and Consistency
    - This section measures the degree to which data reflects the real-world client or service and is congruent with other data.
- Timeliness
    - Measures the degree to which data is collected and available when it is needed. All HMIS participants should strive to minimize the gap between when information is collected and when it is entered into HMIS, with the goal of real-time data entry whenever feasible.

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[1] *Universal Data Elements are required to be collected by all projects participating in HMIS regardless of funding source. The Universal Data Elements are important for the development of the Longitudinal System Analysis (LSA) report.*

[2] *Program-Specific Data elements provide information about the characteristics of clients, the services that are provided, and client outcomes.*

[3] *Please see this link for more information regarding our CoC's Data Quality Monitoring Plan: https://cchealth.org/hmis*

FILTER SETTINGS

By default, the dashboard is set to display all programs participating in HMIS within a predetermined date range. The buttons located at the top of the dashboard allow you to filter out any information that is not relevant to you.
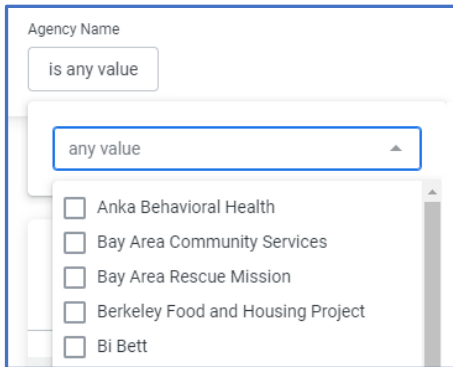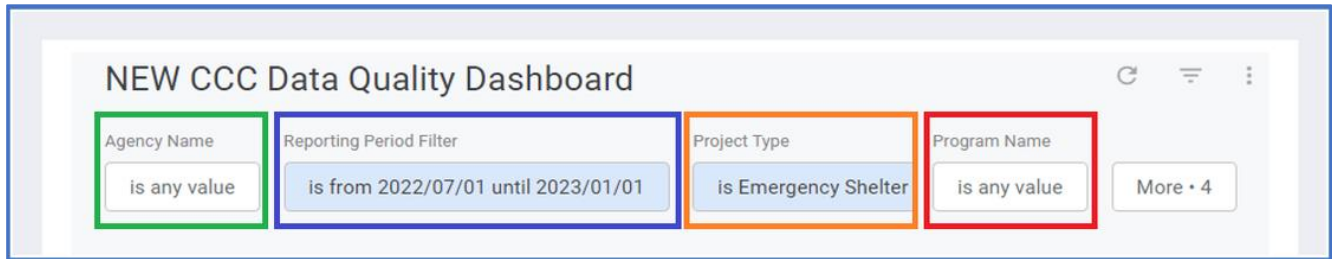
Agency Name: Select which agencies you would like to view.

Reporting Period: Select the start date and end date for the reporting period. The end date must be <u>one day after the end of the reporting period</u>.

> Example: You want to view data for the month of September **only**. Set the reporting period filter to 2022/09/01 until 2022/10/01. One day after the end of September.

Project Type: Select the project types you would like to view.

Program Name: Select the individual programs you would like to view.

There are more filters hidden in the [4]*More* filter-menu, but most of them do not need to be adjusted.

RUNNING AND DOWNLOADING THE DASHBOARD

When you are ready to run the dashboard click the Refresh icon as indicated below. [5]Please wait for the dashboard to load completely before moving forward.

When the dashboard is finished loading, click on the 3 stacked dots as shown to the right. Then click *Download* on the drop-down menu.

A pop-up window will appear where you can choose how the dashboard will be downloaded. Set the *Format* to "*PDF"* and click the blue "*Download"* button.

When making corrections to different tables, please allow 24 hours for changes to be reflected on the dashboard. If changes do not appear, please contact your designated HMIS Agency Administrator for support.

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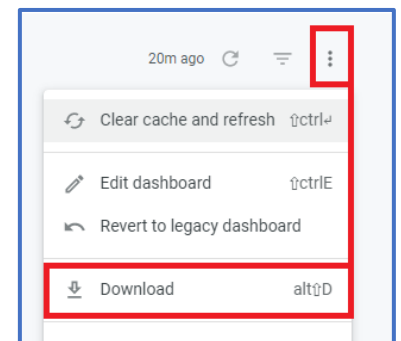
[4] *See page. 33 for further information regarding the More button.*
[5] *Recommended browsers for best performance are Microsoft Edge and Google Chrome. If you notice that you are experiencing longer load times, try changing browsers.*

THE MISSING DATA SECTION

The tables in the Missing Data section are designed to look at client information that is [6]missing from the Client Profile Screen and Program Enrollment/Exit screens. This section is broken down into two large tables. The first table is equipped with drilldown capabilities. The second table provides a score for each data element measured in this section.

Data Quality Dashboard

Missing Data Section

88.20%
Global score

Missing data errors (with drill-downs)

This table finds all clients missing certain required data fields. Click on a highlighted number to see relevant error information.

	Name	SCORE	Number of Clients	Client name error	SSN error	Date of Birth Error	Gender Error	race error	Veteran status error	Relationship to HoH error	3.91
1	BACS Countywide RRH	95.3%	127	1	2	0	1	2	0	0	
2	BACS Delta Landing	93.3%	375	0	22	0	0	4	0	0	
3	BACS-Don Brown Shelter	83.1%	71	0	3	0	0	3	1	0	
4	Berkeley Food and Housing Homeles.	100.0%	58	0	0	0	0	0	0	0	
5	Berkeley Food and Housing SSVF Raj.	98.6%	140	0	2	0	0	0	0	0	
6	Castro Encampment Transition Care	89.8%	88	0	7	0	0	3	0	0	
7	Castro Housing Navigation Program	91.2%	34	0	3	0	0	1	0	0	
8	Catholic Charities Prevention Progran	61.9%	21	0	8	0	0	0	0	0	
9	CCHP - Brookside Shelter	98.9%	95	0	1	0	0	0	0	0	

Both tables list each **program** as a row, and each column represents an **error type**. Cells will become highlighted light green or red when an error is detected. You can click on any highlighted cell to display the specific enrollments causing the error.

> **Global Score:** This is an average of all the percentages in the *SCORE* column.

> **SCORE:** The SCORE is the program-level percentage of all clients with no missing data. This is an approximation, because some clients may be counted twice if they have errors in both their profile and program enrollments.

The second table is a copy of the previous table, except it displays errors as percentages.

Missing data errors (colored by percentage)

This table presents the same data as the previous one. Cells are colored red if they are above the DQMP threshold. Percentages are calculated over all clients that require the data field.

	Program name	SCORE	Number of Clients	Client Name Error	SSN Error (excluding Outreach/NbN Shelters)	SSN Error (Outreach/NbN Shelters only)
1	BACS Countywide RRH	97.2%	71	0.0%	1.4%	0.0%
2	BACS Delta Landing	92.0%	275	0.0%	6.2%	0.0%
3	BACS-Don Brown Shelter	73.9%	23	0.0%	0.0%	0.0%
4	Berkeley Food and Housing Homeless SSVF Pr.	93.0%	43	0.0%	7.0%	0.0%
5	Berkeley Food and Housing SSVF Rapid Rehou.	87.8%	82	0.0%	6.1%	0.0%
6	Castro Encampment Transition Care Program	100.0%	3	0.0%	0.0%	0.0%
7	Catholic Charities Prevention Program	69.2%	13	0.0%	30.8%	0.0%
8	CCHP - Brookside Shelter	94.9%	79	0.0%	2.5%	0.0%

[7]Cells will be colored red if their percentage exceeds the threshold values specified by the Data Quality Monitoring Plan. Cells with errors within an allowable range will be colored light green. Some errors, like SSN errors, have different acceptable levels depending on which project type is collecting the data. Therefore, some error types have been split into two columns so that they can be highlighted accurately.

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[6] *See this link for information regarding our HMIS Data Collection Guide:* *https://cchealth.org/hmis*

[7] *When reviewing the missing data section, please prioritize red colored cells for correction first, and then move on to light green colored cells.*

CLIENT PROFILE SCREEN

The first few columns are related to missing or invalid information entered into the client's profile screen.

CLIENT NAME MISSING

The full first name should be used (e.g., James instead of Jim) and the last name should be recorded in full. Select the *Quality of Name* using the definitions below:

- Select 'Full name reported' if complete, full first and last names have been recorded.
- Select 'Partial, street name, or code name reported' if a partial, short, code name, or nickname was used instead of the full first name.
- Select 'Client doesn't know' if the client does not know their name
- Select 'Client prefers not to answer' if the client prefers not to answer.

SSN MISSING

Enter the client's full social security number. If a partial social security number is obtained, please substitute missing digits with zeros. When enrolling a client who already has a record in Clarity, verify that the SSN in the system is accurate and correct it if it is not. Select the *Quality of Name* using the definitions below:

- Select 'Full SSN Reported' if a complete and valid SSN.
- Select 'Approximate or partial SSN reported' if any SSN other than a complete and valid 9-digit SSN.
- Select 'Client doesn't know' if a client does not know or does not have a SSN.
- Select 'Client prefers not to answer' if a client refuses to provide any part of their SSN.

CLIENT PROFILE

Social Security Number	XXX - XX - 1234
Quality of SSN	Full SSN Reported
Last Name	D Fake -test
First Name	Don
Quality of Name	Partial, street name, or code name reported
Quality of DOB	Full DOB Reported
Date of Birth	01/01/1986 Adult. Age: 38

IF DOB IS UNKNOWN, PLEASE USE THE CLIENT'S AGE TO CALCULATE YEAR OF BIRTH AND USE JANUARY 1 AS THE MONTH AND DAY. IF AGE IS ALSO NOT AVAILABLE, PLEASE USE 1/1/1975 FOR ADULTS, 1/1/2004 FOR YOUTH 18-24, AND 1/1/2015 FOR CHILDREN.

Middle Name	Suffix None
Alias	
Maiden Name	NULL
Gender	Woman (Girl, if child), Transgender
(Contra Costa) Sexual orientation	Select
Race and Ethnicity	American Indian, Alaska Native, or Indigenous, Na...
Additional Race and Ethnicity Detail	
Veteran Status	No
Primary Language	English
Phone or message number	NULL
Email address	NULL
Driver's License Number	
Client Medical Record Number	0
Living with a pet?	No
Check this box if client is deceased	Date of Death (actual or estimated) __/__/____

SAVE CHANGES   **CANCEL**

DATE OF BIRTH MISSING

Record the month, day, and year of birth for every person served. When enrolling a client who already has a record in the HMIS, verify that the date of birth on the record is accurate and correct it if it is not. Select the *Quality of DOB* using the definitions below:

- Select 'Full DOB reported' if the complete date of birth is provided by the client.
- Select 'Approximate or partial DOB reported' if the client cannot provide their full or exact date of birth but is able to provide their age within one year.
- If date of birth is unknown, please use 1/1/1975 for adults, 1/1/2015 for children, 1/1/2004 for youth 18-24.

GENDER MISSING

Record the self-reported gender of each client served. Gender identity is a person's internal perception of themselves and may not match the sex they were assigned at birth. Provide all options to every client. 'Client doesn't know' should only be selected when a client does not know their gender from the options available.

RACE MISSING

Record the self-identified race(s) of each client served. Help the client select the race or races that they most identify with. Allow clients to identify as many racial categories as apply (up to five). If the client does not know their race or ethnicity, or refuses to disclose it, use "Client doesn't know" or "Client refused". When enrolling a client who already has a record in the HMIS, verify that race information is complete and accurate and correct it if it is not.

VETERAN STATUS MISSING

Record whether the client is a veteran. When enrolling a client who already has a record in the HMIS, verify that the veteran status recorded is accurate and correct it if it is not.

DATE OF DEATH

If you are advised that your client has passed away, please toggle the "Check this box if client is deceased" blue, and enter the actual or estimated date of death for your client. This will notify other agencies that they should exit them as deceased from any programs they were previously active in.

CLIENT ENTRY SCREEN ERRORS

The next set of errors are related to missing or invalid information entered into the client's program entry screen.

RELATIONSHIP TO HOH ERROR

This error indicates that the client has a program enrollment that does not have a head of household assigned. The relationship to head of household is recorded on the entry screen.

If the relationship to head of household is not captured, you can adjust this information by clicking the notepad icon next to *Head of Household* on the client's enrollment screen.

Using the drop-down menu, you can specify the head of household and adjust all group members relationships to the HoH. Once completed, click *Save Changes.*

3.917A PRIOR LIVING SITUATION ERROR

This error occurs if any of the questions in the "*Living Situation*" section of the entry screen are left unanswered (ie. this includes client doesn't know, prefers not to answer, or there is an invalid date in the date field).

This section captures the client's last living situation <u>immediately prior to entering your program,</u> including: the length of time the client spent in their "prior living situation" before entering your program, the actual or approximate date this homeless situation began, the number of times the client has been on the streets, or in emergency shelters in the past three years ([8]including today please round up to nearest full month), and the cumulative total number of months the client has been homeless on the streets, or in emergency shelters, in the past three years. The Housing Status field should also not be left blank. More information on page 26.

DISABLING CONDITION ERROR

This error occurs if any of the questions in the "*Disabling Conditions and Barriers*" section of the entry screen are unanswered.

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[8] *If a client only spent one day homeless in a month round to the full month. For example: if a client spent one day homeless in January, one day homeless in February, and one day homeless in March this would equate to three months total homeless.*

If you see a *Disabling Condition Error* message on the entry screen (pictured above) while you are fixing this error, please change the *Disabling Condition* data field to 'yes' or 'no' as the message requests.

DOMESTIC VIOLENCE ERROR

This error will occur if any of the three questions below are left unanswered. Please note that the "*Last Occurrence*" and "*Are you currently fleeing*" fields only appear if the first response is "Yes".

Domestic Violence Victim/Survivor	Yes	Last Occurrence	Six months to one y
Are you currently fleeing?	No		

INCOME ERROR/NON-CASH BENEFITS ERROR ON ENTRY SCREEN

This error is checking that the questions related to income sources, and non-cash benefits have been answered. Selecting "Yes" to either will reveal more questions, but these extra questions are not checked by this error.

MONTHLY CASH INCOME FOR INDIVIDUAL

Employed	Client refused
Cash Income from Any Source	Client doesn't know

NON-CASH BENEFITS

Receiving Non-Cash Benefits	Client doesn't know

HEALTH INSURANCE ERROR

This error is checking that a client's health insurance has been recorded on the entry screen. To fix this error, please answer whether the client is covered by health insurance in the "Health Insurance" section. If the client is covered, then please select at least one insurance type from the list that appears when *Covered by Health Insurance* is answered as "Yes".

HEALTH INSURANCE

Covered by Health Insurance   Yes

MEDICAID
MEDICARE
State Children's Health Insurance Program
Employer-Provided Health Insurance
Veteran's Administration (VA) Medical Services
Health Insurance Obtained Through COBRA
Private Pay Health Insurance
State Health Insurance for Adults
Indian Health Services Program
Other Health Insurance

EXIT DESTINATION ERROR

This error is checking for missing or incomplete answers to the [9]"*Exit Destination*" field on the exit screen. Missing or incomplete answers include "*No Exit Interview Completed*", "*Client Doesn't Know*", *Client Refused*", and "*Data Not Collected.*"

End Program for client Charlie Fake Brown -test

Program Exit Date	09/13/2022
Is the Client an Adult or Head of Household?	Yes (Automatically Generated Response)
Reason for Leaving	Unknown/Disappeared
Destination	No exit interview completed
Discharge Notes	
Discharged to What City?	Select

Select the destination response category that most closely matches where the client is staying after exit from the program. If "No exit interview was completed", please review the client's program history in HMIS to see if they entered a shelter or other residential program within two-weeks of exit from your program. Or use your best guess on exit destination.

*Please note that exiting a client to a permanent destination should only be done if there is evidence that the client moved into a permanent living situation.

*Exits to permanent destinations will remove them from the community housing queue and close out their Contra Costa CES enrollment. This can disrupt a client's services especially in vulnerable individuals and families.

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[9] *For more information regarding exit destinations please see this link: https://cchealth.org/h3/coc/pdf/HMIS-Exit-Destinations-Reference-Guide.pdf*

CONTRA COSTA CES ERRORS

Next are several tables dedicated to finding clients that are missing different elements of their Contra Costa CES enrollment. All clients who are enrolled in a CE participating program must have at minimum:

- An active enrollment in Contra Costa CES
- A Contra Costa Triage assessment
- A Current Living Situation assessment

The title of these tables explains what the client is missing and who is responsible for making the corrections. The tables also provide helpful information and links to client profiles and enrollments.

CLIENTS MISSING CES ENROLLMENT

This table indicates that the client does not have an active enrollment in Contra Costa CES.

To fix this, use the *Personal ID* column to access the client's profile and change your agency access to "Contra Costa CES". Navigate to the "*Programs*" tab.

Review the client's "*Program History*" and verify that a CES enrollment doesn't already exist with an exit date that overlaps with your program enrollment record.

- If this occurs, it means another program exited your client to a permanent housing destination or auto-exit occurred because of no recent activity on your client's profile within the last six months.

- If no active or overlapping CES program exists, please enroll your client(s) by selecting "Contra Costa CES" from the *Programs Available* section, toggle all applicable group members, and click enroll.

HOH ENROLLED IN CES BUT MISSING TRIAGE ASSESSMENT

This table indicates that a Head of Household who is enrolled in Contra Costa CES, does not have a completed Contra Costa CES Triage Assessment.

To fix this, use the *CES Enrollment ID* column to access the client's enrollment and change your agency access to "Contra Costa CES". Click on the program-level assessments tab and complete the "Contra Costa CES Triage Assessment".

Once completed you should see the assessment under the Assessment History section.

HOH ENROLLED IN CES WITHOUT CLS

This table indicates that a Head of Household who is enrolled in Contra Costa CES, does not have a completed Current Living Situation assessment.

To fix this use the *CES Enrollment ID* to access the clients Contra Costa CES enrollment and change your agency access to "Contra Costa CES". Click on the program-level assessments tab and complete the "Current Living Situation" assessment.

Once completed you should see the assessment under the *Assessment History* section.

SERVICE MISSING CLS (HOH CLIENTS AND SERVICE-ONLY PROGRAMS)

This table indicates that a Head of Household received services from a service-only program but is missing a Current Living Situation assessment for that service-date. **Please note that this CLS is located under the program-level assessment tab of your primary program. Not CES.**


To fix this, first take note of the *Service Start Date* and *Service Item Name* columns. Then use the *Enrollment ID* to access the client's enrollment. Verify that the applicable service item/date is present under the clients' service history.
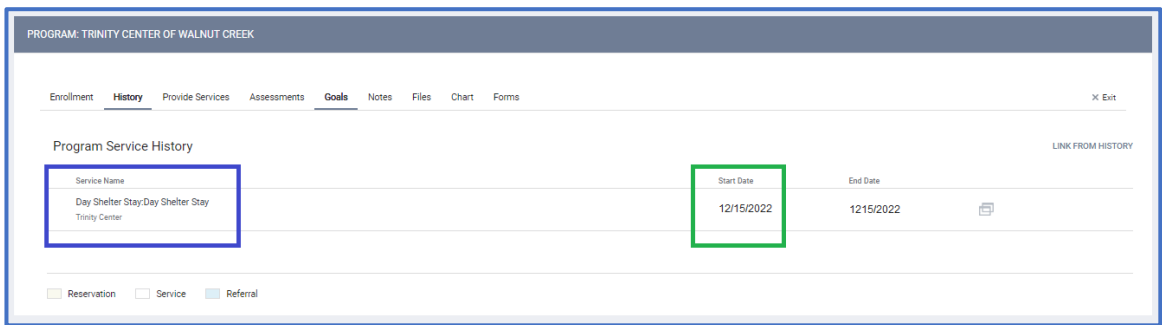
Next go to the program-level assessments tab and complete a "Current Living Situation" assessment for the date the service occurred.
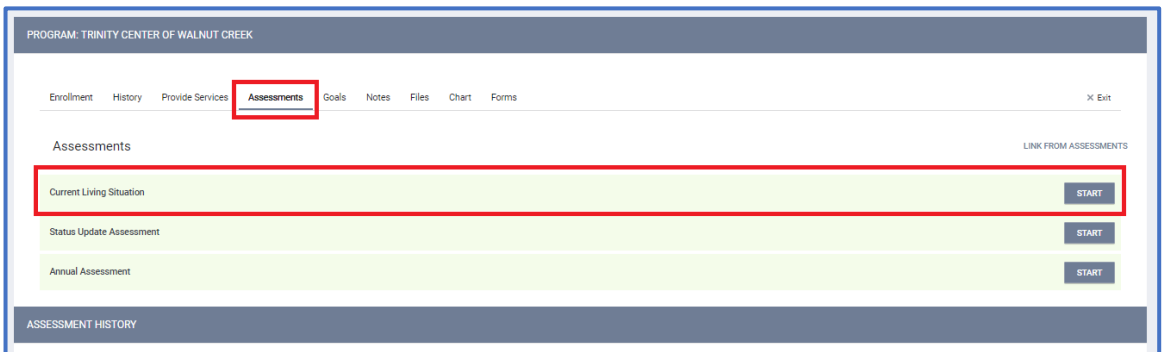
Once completed you should see the assessment under the *Assessment History* section.

THE ACCURACY AND CONSISTENCY SECTION (PART 1)

The tables in the Accuracy and Consistency section detect when inconsistent data has been entered into client entry and exit screens. These are pieces of information that directly contradict each other. The Accuracy errors (with drilldowns) table pictured below is set up identically to the missing data errors section.

The second table is a copy of the previous one. It has the same information except written as percentages. There is no threshold level for these errors. All cells with more than 0 errors will be highlighted red.

CASH/BENEFITS CONFLICT

(ENTRY SCREEN)

This column is looking for errors in two different sections on the entry screen. Make the following changes to the client entry screen if this applies to them:

1. If the client is recorded as having **cash income** but did not toggle any sources, then either select an income source or change **"Cash Income from Any Source"** to "No".
   a. After you toggle an income source, you will be asked to provide the dollar amount that the client receives. [10]**Please ensure that the *Amount* field is filled in for all selected income sources and that they do not equal $0.**

2. If the client is recorded as receiving [11]**non-cash benefits** but no benefit has been toggled, then either select a benefit source or change **"Receiving Non-Cash Benefits"** to "*No*".

(EXIT SCREEN)

This error is the same as the previous, except it occurs on the exit screen.

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[10] *Those receiving SSDI should be marked as having a disabling condition and have their disability type recorded.*
[11] *Please see Non-Cash Benefits Tracking in HMIS for more information:* *2-Non-Cash Benefits for CoC Porgrams (003).pdf*

DATE OF BIRTH AFTER PROJECT START

This error indicates that a client's date of birth is greater than their program start date. If a [12]new client is added to an existing household after the original household's start dates, the new client's start date should reflect the actual day the new member entered the program.

To fix this error, verify that the clients date of birth is correct.

- If it is not, enter the correct date of birth.
- If it is, adjust the clients program start date to reflect when they first started receiving services.

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[12] If this client is a newborn baby, the program start date would reflect the date the program started providing housing or services to the newborn, which should be one day after the baby's date of birth.

DISABLING CONDITION

This error occurs on the client's entry screen, and it has two possible causes.

1. A disability has been recorded and yet the "*Disabling Condition*" question is marked "*No*".

2. No disabilities were recorded, and yet the "*Disabling Condition*" question is marked "*Yes*".

To fix the error, update the information on the client's disabilities if needed. Then change the *Disabling Condition* data field as the "Disabling Condition Error" message requests.

EMPLOYMENT / INCOME CONFLICT

(ENTRY SCREEN)

This error appears on a client's entry screen when they are employed but not marked as earning any income or worker compensation. [13]If a client is employed, it is implied that they are receiving compensation.

To correct this error, verify that the client was employed at enrollment, if they were not change the response to *Employed* to No.

If the client was employed, confirm what cash-income sources they had at the time. Select as many as apply. As a reminder, make sure that the *Amount* field is filled in for all selected income sources and is not $0.

(EXIT SCREEN)

This error is the same as the previous, except it occurs on the exit screen and reflects the client's employment/income status at program exit.

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[13] *This may not be an error if a client is newly employed and has not received compensation yet. When the client receives their first paycheck, please complete a "Status Update" assessment so that the change in income is captured.*

HOUSEHOLDS WITH MORE THAN ONE HOH

This error occurs when more than one person has been indicated as the head of household.

To fix this identify which adult member of the household is acting as the head of household. Then go to that client's enrollment screen and click on the notepad icon next to the *Head of Household* field.

Using the drop-down menu adjust the group members relationship to the head of household. There can only be one head of household for each household, and if group members are composed of adults and children, an adult must be indicated as the head of household.

HOUSING MOVE IN DATE ERROR

This error occurs if a client has received a move-in date <u>before their program start date</u> or <u>after their program exit date</u>. Housing Move-in Date's must be a date occurring either on or between the [14]Program Start Date and Program Exit Date. [15]There can be no more than one "Housing Move-In Date" per enrollment. If a client loses their housing, a new enrollment must be added as well as a new move-in date if appropriate.

- If the clients Housing Move-in Date occurs <u>before their program start date</u> (pictured above) verify when the client was physically housed and adjust the clients start date if needed.
- Alternatively, if the clients Housing Move-in Date occurs <u>after their program exit date</u>, verify when the client was physically housed and adjust either the move-in date, or the clients exit date as needed.
- If the client <u>transfers from one PH project to another due to closure of the previous project</u>, the new housing move-in date would equal the same date as the new program start date.

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[14] *Housing Move-in Date may be the same date as Program Start if the client moves into housing on the date they were accepted into the project.*
[15] *An old Housing Move-In Date from an old project may cascade into a new program enrollment. If the old project's housing move-in date is not removed from the current, a negative "days to housing" will appear in data quality reports.*

HOUSING STATUS AND LIVING SITUATION CONFLICT

This error appears on a client's entry screen when their housing status is not in alignment with their [16]residence prior to entry.

As in the example below, a client who is renting without an ongoing subsidy is stably housed and does not fit the criteria for a housing status of Category 1 – Homeless.

Housing statuses should be assigned based on the living situation that most closely matches where the client was residing prior to program start.

Use the check list on the next page to make sure clients meet all the requirements for housing status based on HUD definitions.

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[16] *The client's self-reported residence prior to entry should not be contradicted by other simultaneous/open/active program enrollments*

[17]HOUSING STATUS CHECKLIST

Category 1: Literally Homeless

- ☐ Has a primary nighttime residence that is not meant for human habitation; or

- ☐ Is living in a congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs or

- ☐ Is exiting an institution where they resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation <u>immediately before</u> entering that institution.

Category 2: Imminent Risk of Homelessness

- ☐ Individuals and families who are within 14 days of losing their housing, including housing they own, rent, are sharing with others, or are living in without paying rent.

- ☐ No subsequent residence has been identified; and

- ☐ The individual or family lacks the resources needed to obtain other permanent housing.

Category 3: Homeless Under Other Federal Statutes

- ☐ Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who are defined as homeless under the other listed federal statutes; Used by agencies Who also receive RHY funding.

Category 4: Fleeing/Attempting to Flee Domestic Violence

- ☐ Any individual or family who is fleeing, or is attempting to flee, domestic violence; Used by agencies who are identified as a VSP (Victims Service Provider)

At-Risk of Homelessness

- ☐ An individual or family who has an annual income below 30% of median family income for the area; AND does not have sufficient resources immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the "homeless" definition.

- ☐ Has moved 2 or more times during the last 60 days; OR Is living in the home of another; OR will have lost the right to occupy their current housing within 21 days of enrollment; OR lives in a hotel/motel and the cost is not paid for by charitable organizations or by Federal, State or local government programs; OR lives in an SRO or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit which there reside more than one and a half persons per room; OR is exiting a publicly funded institution or system of care; OR otherwise lives in housing that is unstable and an increased risk of homelessness.

- ☐ A child or youth who does not qualify as homeless under the homeless definition but qualifies as homeless under another Federal statute.

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[17] *Please see this link for further information and criteria regarding housing statuses:*
https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-homeless-eligibility/four-categories/at-risk-of-homelessness/

ENROLLMENT WITH INVALID HOH

This error occurs in one of three different situations:

1. The initial head of household exits a program before other group members.
   a. Verify that the remaining group members did not exit with their HoH.
   b. If they did, please exit the rest of the household.
   c. If they did not, a new adult head of household must be assigned.

2. A child is entered as the head of household in a group enrollment.
   a. Identify and assign the adult head of household for the enrollment.
3. A child is entered as an individual.

   a. Please send the Unique Identifiers of the child and their household to your designated HMIS Agency Administrator, who will in turn request that the enrollments be merged into a group.

PROJECT END BEFORE PROJECT START

This error indicates that a clients <u>program start date is greater than their program end date</u>. The Program Start Date should always be after the clients' Date of Birth and [18]the Program Start Date should always be before their Program Exit date.

To fix this verify when the client officially enrolled into (and exited from, if applicable) the program and adjust the dates appropriately.

PROJECT START BEFORE/AFTER GRANT DATE

This error is caused by a client being enrolled in a program when there are no active grants for the program on record. Check that the enrollment's start and end dates are accurate. If the enrollment is accurate, then contact H3RedTeam@cchealth.org to update the program's grant information.

MOVE IN DATE / DESTINATION CONFLICT

This error occurs when a client in a PH program exits to a Rental destination but does not have a recorded move-in date. This move-in date must be recorded on the entry screen for RRH/PSH programs.

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[18] *Program Start and exit dates should not be the same in non-Night by Night shelters.*

THE ACCURACY AND CONSISTENCY SECTION (PART 2)

The next tile in this section looks at three incongruencies related to the Prior Living Situation section of the enrollment screen. These questions include the Approximate Date THIS Episode of Homelessness Started, Number of times the client has been on the streets, in ES, or Safe Haven in the past three years (including this time), Total unique months homeless (on the streets/shelter/safe haven) in the past three years. If client was homeless even 1 day in a particular month, please count as a full month.

PRIOR LIVING SITUATION ERRORS

Above this tile you will find some descriptions of the errors that this tile is looking at, as well as some instructions for making corrections.

Prior Living Situation Errors

> This table finds accuracy errors involving the Prior Living Situation fields on the entry screen. Please note that the 'Homelessness Start Date' field should reflect the start date of the current homeless episode.
If a drilldown menu displays an error, click the "explore" button in the top right corner to open the drilldown menu in a new window.
- **Homelessness Start Date Later Than Entry** - The information at Project Start should reflect the client's situation at the point of Project Start. Please check the "Homelessness Start Date" field for accuracy.
- **Homelessness Start Date conflicts with Months/Times Homeless** - If the current episode of homelessness started more than 3 years ago, then Total Months Homeless in Last 3 years should be "More than 12 months", and Times Homeless should be "One Time".
- **Invalid Homelessness Start Date/Months Homeless** - The number of months homeless should be the unique number of calendar months homeless (one day or a partial month counts as a full month).

	Program Name	Homelessness Start Date Later Than The Enrollment Start Date	Homelessness Start date conflicts with Months/Times Homeless	Invalid Homelessness Start Date/Months Homeless
1	BACR - HHAP4 Rapid Rehousing for Families	0	0	1
2	BACS - Opportunity Village	0	25	6
3	BACS Delta Landing	0	31	56
4	BACS-Don Brown Shelter	0	2	14
5	Berrellesa Palms	0	0	1
6	Bringing Families Home - Eviction Prevention	0	0	0
7	Bringing Families Home - Rapid Rehousing	0	1	4
8	Cal AIM - Outside Referrals	0	0	0
9	Castro Encampment Transition Care Program	0	0	4
10	Castro Housing Navigation Program	0	1	0
11	CCHP - Brookside Shelter	0	0	0
12	CCHP - Concord Shelter	0	0	0
13	CCYCS - Appian - Mary McGovern	0	0	0

HOMELESSNESS START DATE LATER THAN THE ENROLLMENT START DATE

The first column is referencing client enrollments where the clients project start date is prior to the "Approximate Date THIS Episode of Homelessness Started" field. An example of this would be a client who enrolls in a program on 2/3/2024 but reports an approximate homelessness start date of 2/23/2024, which is 20 days in the future. Please see the example to the right for what this would look like on a client enrollment screen.

To fix this error, please update the approximate date of homelessness field to reflect the date that this **current episode** of homelessness occurred for the client **prior** to their enrollment in your program.

HOMELESSNESS START DATE CONFLICTS WITH MONTHS/TIMES HOMELESS

The second column is referencing client enrollments where the approximate date homelessness started was three or more years prior to the project start date, however, the number of times homeless is reported as <u>more than one time</u>, and or the total unique months homeless <u>is not "more than 12 months"</u>.

An example of this would be a client who enrolls in a program on 1/22/2024 and reports that they have been homeless 3 times in the last 3 years, and that the total unique months they have homeless is 3 months (see example to the bottom left).

There are two ways to correct this error:

1. Correct the Approximate Date THIS Episode of Homelessness Started to reflect their **current episode of homelessness**. If the client truly has been homeless 3 times in the last 3 years, then you will want to record the most recent one.
2. If the Approximate Date THIS Episode of Homelessness Started field is accurate, then you must change the **number of times to 1**, and you must ensure that the **total unique months is "more than 12 months"**. This is because the client has been experiencing a single unbroken point of homelessness for more than 12 months. (see example to the bottom right)

INVALID HOMELESSNESS START DATE/MONTHS HOMELESS

The third column is referencing enrollments where the reported total unique months homeless is incorrect. The total unique months homeless is asking for a count of calendar months between the client's approximate homelessness start date and the program start date, even if it is just one day. A single day of homelessness in a calendar month is sufficient evidence to count the client homeless for the entire month.

An example of this would be a client who enrolls in a program on 11/02/23, reports an approximate homelessness start date of 8/30/2023, however the total unique months homeless is reported as two months. (see example bottom right)

To fix this count the number of unique calendar months from August to November:

<mark>(August, September, October, November)</mark>
<mark>4 Months</mark>

Then update the total unique months homeless to "Four Months". (see example bottom left)

Program Date	11/02/2023	
TRANSLATION ASSISTANCE NEEDED		
Translation Assistance Needed	No	
Phone or message number	NULL	
Who referred you to this program?	Self	
PRIOR LIVING SITUATION (WHERE DID THE CLIENT SLEEP THE NIGHT BEFORE INTAKE)		
Type of Living Situation	Place not meant for habitation (e.g., a vehicle, an abandoned building, bu...	
Length of Stay in Prior Living Situation	90 days or more, but less than one year	
Approximate Date THIS Episode of Homelessness Started	08/30/2023	
Number of times the client has been on the streets, in ES, or Safe Haven in the past three years (including this time)	One Time	
Total unique months homeless (on the streets/shelter/safe haven) in the past three years. If client was homeless even 1 day in a particular month, please count as a full month.	Two Months	

Program Date	11/02/2023	
TRANSLATION ASSISTANCE NEEDED		
Translation Assistance Needed	No	
Phone or message number	NULL	
Who referred you to this program?	Self	
PRIOR LIVING SITUATION (WHERE DID THE CLIENT SLEEP THE NIGHT BEFORE INTAKE)		
Type of Living Situation	Place not meant for habitation (e.g., a vehicle, an abandoned building, bu...	
Length of Stay in Prior Living Situation	90 days or more, but less than one year	
Approximate Date THIS Episode of Homelessness Started	08/30/2023	
Number of times the client has been on the streets, in ES, or Safe Haven in the past three years (including this time)	One Time	
Total unique months homeless (on the streets/shelter/safe haven) in the past three years. If client was homeless even 1 day in a particular month, please count as a full month.	Four Months	

THE ACCURACY AND CONSISTENCY SECTION (PART 3)

The remainder of the Accuracy and Consistency Section looks at incongruencies between program enrollments and assessments.

THE RESIDENTIAL OVERLAPS TABLE

This table identifies clients with program enrollments that overlap in ways that indicate a client is residing in two places at once. Clients can be enrolled in multiple projects at a time; however, clients should never be enrolled in multiple residential projects at the same time (e.g., ES, TH, or PH with move-in date).

	Unique Identifier ^	Personal ID	Agency ^	Program Name ^	Project Type	Start Date	Move-in Date	Exit Date	Overlapping Program	Overlapping Program Name	Overlapping Project Type	Overlapping Program Start Date	Overlapping Household Move-in Date	Overlapping Program End Date Date
1	***********	151009	Bay Area Community Services	BACS Delta Landing	Emergency Shelter	2021-04-01	∅	2022-11-07	Hope Solutions	Emergency Housing Voucher (EHV) Program	PH - Housing with Services (no disability required for entry)	2022-11-03	2022-11-03	∅
2	***********	132700	Bay Area Community Services	BACS Delta Landing	Emergency Shelter	2021-10-08	∅	2022-07-13	Hope Solutions	Emergency Housing Voucher (EHV) Program	PH - Housing with Services (no disability required for entry)	2022-07-12	2022-07-12	∅
3	***********	66387	Bay Area Community Services	BACS Delta Landing	Emergency Shelter	2021-10-20	∅	∅	Hope Solutions	Emergency Housing Voucher (EHV) Program	PH - Housing with Services (no disability required for entry)	2022-12-12	2022-12-12	∅
4	***********	147111	Bay Area Community Services	BACS Countywide RRH	PH - Rapid Re-Housing	2021-07-09	2022-04-07	2022-07-25	Hope Solutions	Emergency Housing Voucher (EHV) Program	PH - Housing with Services (no disability required for entry)	2022-04-07	2022-04-07	∅

Clients appear on this table if one of the following situations occurs.

1. **A client cannot be enrolled in two programs from (ES, TH, Safe Haven) at the same time.**
   - ○ Ex: A client has a bed in a transitional housing program but is recorded as having spent several nights in an emergency shelter.
      - ▪ The client should not be utilizing beds in an emergency shelter if they are residing in a transitional housing project.

2. **A client cannot be enrolled in an ES, TH, Safe Haven, PH program while also being permanently housed by a PH program.**
   - ○ Ex: A client who has a bed in an emergency shelter, but also has a housing move-in date for the permanent housing unit they recently moved into.
      - ▪ The client should not occupy a bed in a shelter while being stably housed.
      - ▪ The client should be exited from the shelter the same day the client began residing in their permanent housing unit.

CE ASSESSMENT LEVEL ERRORS

This table finds "CCC VISDPAT" and "Contra Costa Triage" assessments whose *Assessment Level* question was answered incorrectly.

To fix this, use the *Assessment ID* column to access the client's assessment.

- If the assessment is a **VISPDAT**, then change the *Assessment Level* to "**Housing Needs Assessment**".
- If it is a **Triage** assessment, then change the *Assessment Level* to "**Crisis Needs Assessment**".

THE TIMELINESS SECTION

The timeliness section contains tables that track time-sensitive information about clients. For technical reasons, several tables in this section are not affected by the reporting period filter. By default, these tables will display all events completed within the previous complete month.

- For example, if today is July 14, then the table will use June 1 – June 30 for its date range and find all enrollments/services/assessments that were entered into HMIS during that period.

TIMELINESS DATA TABLE

This first table shown below, tracks how many **enrollments**, **services**, and **assessments** are entered on time.

The system time stamps each enrollment, service, and assessment the moment the records are saved in HMIS. The date the record was created is compared to the program start, assessment date, or service date provided. The record will be considered late if it is entered into HMIS more than 3 days after the event occurred.

- Ex: On Monday, a case manager conducts an intake interview and enrolls their client in their program. However, the case manager misses the 3-day threshold and enters the client's enrollment on that Friday.
  - That enrollment will populate on the "Late Enrollments" column because it was entered into HMIS 4 days after the client's program start date.

DUE ANNUAL ASSESSMENTS

Programs that conduct annual assessments are expected to complete them within 30 days of the head of household's enrollment anniversary. An annual assessment is late if it is not completed within this window. This table displays all annual assessments that need to be completed soon, as well as those that are late (past due).

To fix this, use the "*Enrollment ID*" to access the client's enrollment record.

Then click the plus sign beside *Status Assessments* as seen above.

On the pop-up that appears make sure that the client and any applicable group members are toggled, then click "*Add Annual Assessment*".

BED UTILIZATION TABLES

These two tables by default display bed utilization information for the last complete month. This information is used to calculate a bed utilization rate.

The *Total Bed Nights* is the number of beds multiplied by the number of days in the reporting period. The number of beds available is taken from previously reported bed inventory numbers.

The *Bed Utilization Rate* is the percent of these bed-nights used.

Bed Utilization for ES and TH programs

> Bed nights are calculated only for the last complete month.
> HUD's acceptable range is 65% - 105% for ES/TH programs. Please provide a reason for cells that are outside of HUD's acceptable range.

	Name	Project Type Code	Days in Reporting Period	Bed Capacity per day (avg)	Total bed nights for reporting period	Total Bed nights utilized in Reporting Period	Bed Utilization Rate	Avg # beds filled per day
1	CCHP - Brookside Shelter	Emergency Shelter	30	39.0	1,170	1,164	99.5%	38.8
2	CCHP - Concord Shelter	Emergency Shelter	30	66.0	1,980	1,749	88.3%	58.3
3	CCYCS - Appian - Mary McGovern	Transitional Housing	30	13.0	390	161	41.3%	5.4
4	CCYCS - Bissell/Pomona Apts	Transitional Housing	30	13.0	390	303	77.7%	10.1
5	CCYCS - Calli House	Emergency Shelter	30	15.0	450	309	68.7%	10.3
6	Concord Warming Center	Emergency Shelter	30	6.0	180	178	98.9%	5.9
7	GRIP Family Emergency Shelter	Emergency Shelter	30	42.0	1,260	2,215	175.8%	73.8
8	Philip Dorn Respite Center	Emergency Shelter	30	26.0	780	522	66.9%	17.4
9	SHELTER, Inc. - Mountain View House	Emergency Shelter	30	20.0	600	459	76.5%	15.3
10	Ujikema House	Transitional Housing	30	12.0	360	337	93.6%	11.2
11	Veterans Accession House	Transitional Housing	30	17.0	510	333	65.3%	11.1
12	Winter Nights Shelter	Emergency Shelter	30	0.0	0	497	0	16.6

Occupied beds in ES and TH programs are tracked by the attendance module. If an ES or TH program does not use this module, then we calculate by the total days enrolled in program instead.

Bed Utilization for PSH programs

> Bed nights are calculated only for the last complete month.
> HUD's acceptable range is 85% - 105% for PSH programs. Please provide a reason for cells that are outside of HUD's acceptable range.

	Name	Project Type Code	Days in Reporting Period	Bed Capacity per day (avg)	Total bed nights for reporting period	Total Housed Days in Project During the Reporting Period	Bed Utilization Rate	Avg # beds filled per day
1	CCYCS - Permanent Connections	PH - Permanent Supportive Housing ...	30	10.0	300	270	90.0%	9.0
2	COC RAP Lakeside	PH - Permanent Supportive Housing ...	30	4.0	120	120	100.0%	4.0
3	COC RAP Ohio Street	PH - Permanent Supportive Housing ...	30	9.0	270	150	55.6%	5.0
4	COC RAP Tenant-Based Rental Assi...	PH - Permanent Supportive Housing ...	30	445.0	13,350	12,660	94.8%	422.0
5	COC RAP Villa Vasconcellos	PH - Permanent Supportive Housing ...	30	5.0	150	150	100.0%	5.0
6	Destination Home	PH - Permanent Supportive Housing ...	30	12.0	360	390	108.3%	13.0
7	Hope Solutions - Access	PH - Permanent Supportive Housing ...	30	48.0	1,440	1,380	95.8%	46.0
8	Hope Solutions - Families in Suppor...	PH - Permanent Supportive Housing ...	30	79.0	2,370	2,310	97.5%	77.0
9	Hope Solutions - Garden Park Apart...	PH - Permanent Supportive Housing ...	30	65.0	1,950	1,830	93.8%	61.0
10	Hope Solutions - Lakeside Apartme...	PH - Permanent Supportive Housing ...	30	34.0	1,020	810	79.4%	27.0
11	HUMS Permanent Supportive Housi...	PH - Permanent Supportive Housing ...	30	30.0	900	810	90.0%	27.0
12	Idaho Apartments	PH - Permanent Supportive Housing ...	30	28.0	840	796	94.8%	26.5
13	SHELTER, Inc. - Permanent Turningp...	PH - Permanent Supportive Housing ...	30	54.0	1,620	1,633	100.8%	54.4

For PSH programs, occupied beds/units are tracked by how many clients have been enrolled and given a move-in date.

If you have any questions or concerns regarding the instructions given in this guide, or if this guide was unable to address your problem, please reach out to your designated HMIS Agency Administrator for support.