

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013



## PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health**

Type: Good Samaritan

### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

**Demographic Data**      Total Clients:      22

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	1	4.55%
length of Stay	1	4.55%
Zip Code	1	4.55%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

### Bed Utilization

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Good Samaritan	17	20	118%

### Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Good Samaritan	0	2	0	4	7	7	2

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013

## PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health**

Type: Laurel Brook II



### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

**Demographic Data** Total Clients: 30

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	0	0.00%
length of Stay	0	0.00%
Zip Code	3	10.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

### Bed Utilization

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Laurelbrook II	51	27	53%

### Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Laurelbrook II	8	6	4	7	1	1	3

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013

## PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health**

Type: Master Leasing

### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality



**Demographic Data**      Total Clients: 54

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	0	0.00%
length of Stay	0	0.00%
Zip Code	10	18.52%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

## Bed Utilization

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Master Leasing	15	24	160%

## Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Master Leasing	6	9	4	13	11	8	3

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013



## PROGRAM INFORMATION

Agency Name: **Department of Behavioral health**

Type: New Horizons II

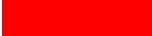

### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

Total  
Clients: 47

### Demographic Data

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	0	0.00%
length of Stay	0	0.00%
Zip Code	0	0.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

 Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

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### Bed Utilization

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
New Horizons II	53	59	111%

### Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
New Horizons II	2	6	1	3	18	9	9

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013

## PROGRAM INFORMATION

Agency Name: **Department of Behavioral health**

Type: Project Gateway



### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

**Demographic Data**      Total Clients:      16

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	2	12.50%
length of Stay	2	12.50%
Zip Code	0	0.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

### Bed Utilization

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Project Gateway	24	16	67%

### Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Project Gateway	0	0	7	5	2	1	2

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013

## PROGRAM INFORMATION

Agency Name: **Department of Behavioral health**

Type: Project Lantern Woods



### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

**Demographic Data**      Total Clients:      12

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	0	0.00%
length of Stay	0	0.00%
Zip Code	1	8.33%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

### Bed Utilization Report

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Project Lantern Woods	21	11	52%

### Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Project Lantern Woods	2	2	0	1	3	3	1

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.

# HMIS Data Quality Report Card

Sample Reporting Period 6/1/2013-6/30/2013



## PROGRAM INFORMATION

Agency Name: **Department of Behavioral health**

Type: Stepping Stones

### Data Quality and Completeness:

Complete and accurate records are needed to ensure quality

**Demographic Data** Total Clients: 40

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	0	0.00%
length of Stay	0	0.00%
Zip Code	0	0.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	0	100.00%

Fields with values over 5% errors.  
 Fields with values 5% or less.  
 0.00% Fields with no errors.

Missing data includes responses such as: "Don't Know," "Refused," "Unknown," and invalid responses. A program should have less than 5% missing field rate in order to ensure accurate data. Missing intake and exit data needs to be reviewed by staff on a regular basis and any additional Universal Data Element information received from the consumer after intake should be entered into HMIS.

## Bed Utilization Report

Program	Bed Count	Occupying Individuals	Percent Bed Occupancy
Stepping Stones	75	36	48%

## Data Timeliness Report

Program	1 - 7 days	8 - 14 days	15 - 21 days	22 - 30 days	31 - 60 days	61 - 90 days	over 90 days
Stepping Stones	6	3	0	4	8	4	14

This report calculates the difference between the program entry date specified for the client and the date the client's application was entered into the system. For example, if a client's Program Entry date of "April 4, 2010" was recorded on April 9, 2010, then the report would calculate a 5 day lag time in recording data. The report groups the number of applications by program and has 7 buckets for the number of days an application has been lagging.