HMIS Data Quality Report Card

Sample Reporting Period 12/01/2013-12/31/2013

PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health (DBH)**
Type: Good Samaritan

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing data, the less useful and meaningful that data becomes.

Demographic Data	Total Clients:	29
	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	1	3.45%
Residence Prior	1	3.45%
length of Stay	0	0.00%
Zip Code	0	0.00%
Housing Status	1	3.45%
Entry Date	0	0.00%
Exit Date	29	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	18	29	*161%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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**	**3**	**2**	**5**	**8**	**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, 2013" was recorded on April 9, 2013, 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 Users:

Below is a list of all HMIS Users at your agency. Please make sure that active users have logged in within the past month. If any user on this list has left your agency during the last reporting period, then please email the HMIS helpdesk. Users are considered inactive if they have not logged into the system for 30 days or left the agency. If a user is inactive, or if you have additional staff needing HMIS access or training, please contact HMIS.

Uer ID:	Name:		Email:	Last Login:
DBH_andreab	Andrea	Buttner	andreab@mercyhouse.net	3/18/2013
DBH_bmurillo	Becky	Murillo	bmurrillo@hacsb.com	
DBH_bschneider	Betty	Schneider	bschneider@dbh.sbcounty.gov	
DBH_davidk	David	Kotce	davidk@mercyhouse.net	
DBH_dianev	Diane	Valdivia	Dvaldivia@dbh.sbcounty.gov	
DBH_ejohnson	Evon	Johnson	ejohnson@hacsb.com	
DBH_emorales	Eloise	Morales	emorales@dbh.sbcounty.gov	7/3/2013
DBH_jdowdall	Jerry	Dowdall	jdowdall@dbh.sbcounty.gov	
DBH_jsaul	Judy	Saul	judys@mercyhouse.net	3/18/2013
DBH_jwilliams	Josephine	Williams	jwilliams@dbh.sbcounty.gov	
DBH_kcastillo	Kathleen	Castillo	kcastillo@hacsb.com	
DBH_kturner	Kerry	Turner	kturner@dbh.sbcounty.gov	
DBH_ljones	Lisa	Jones	ljones@hacsb.com	
DBH_mlwork	M. Ines	Work	iwork@hacsb.com	
DBH_phudspeth	Pamela	Hudspeth	phudspeth@dbh.sbcounty.gov	
DBH_rsims	Ronda	Sims	rsims@dbh.sbcounty.gov	7/10/2013
DBH_tinap	Tina	Pham	tpham@db.sbcounty.gov	6/25/2013
DBH_tscott	Tina	Scott	tscott@hacsb.com	

HMIS Data Quality Report Card

Sample Reporting Period12/01/2013-12/31/2013

PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health (DBH)**

Type: Laurel Brook II

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing data, the less useful and meaningful that data becomes.

Demographic Data Total Clients: 24

	# 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	10.34%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	24	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	27	24	89%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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	**6**	**5**	**4**	**6**	**1**	**1**	**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, 2013" was recorded on April 9, 2013, 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 12/01/2013-12/31/2013

PROGRAM INFORMATION

Agency Name: **Department Of Behavior Health**
Type: Master Leasing

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data Total Clients: 52

	# Missing	% Missing
Race	8	15.38%
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	11	21.15%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	30	57.70%

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	30	*200%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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	**5**	**3**	**5**	**10**	**4**	**3**	**0**

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, 2013" was recorded on April 9, 2013, 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 12/01/2013-12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**
Type: New Horizons II

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data Total Clients: 139

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	1	0.72%
Disabling condition	7	5.03%
Residence Prior	0	0.00%
length of Stay	6	4.31%
Zip Code	0	0.00%
Housing Status	5	3.60%
Entry Date	0	0.00%
Exit Date	135	97.12%

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
New Horizons II	123	135	*110%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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	4	10	13	11	38	36	19

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, 2013" was recorded on April 9, 2013, 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 12/01/2013-12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**
Type: Project Gateway

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data Total Clients: 17

	# Missing	% Missing
Race	1	5.88%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	0	0.00%
Residence Prior	2	11.76%
length of Stay	2	11.76%
Zip Code	0	0.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	16	94.11%

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	17	16	94%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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	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 systemic For example, if a client's Program Entry date of "April 4, 2013" was recorded on April 9, 2013, 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 12/01/2013 - 12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**
Type: Project Lantern Woods

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data	Total Clients:	11
	# Missing	% Missing
Race	1	9.09%
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	9.09%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	10	90.09%

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	17	10	**59%

***Typically, programs reporting <u>over 105%</u> of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that <u>less than 65%</u> of their beds are occupied are not entering all clients into their HMIS.**

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	**1**	**2**	**0**	**1**	**3**	**2**	**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, 2013" was recorded on April 9, 2013, 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 12/01/2013 - 12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**

Type: Stepping Stones

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data	Total Clients:	64
	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	1	1.56%
Disabling condition	5	7.81%
Residence Prior	0	0.00%
length of Stay	5	7.81%
Zip Code	1	1.56%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	59	92.19%

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	51	59	*116%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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	**5**	**3**	**3**	**6**	**11**	**11**	**18**

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, 2013" was recorded on April 9, 2013, 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 12/01/2013 - 12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**

Type: Whispering Pines

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data	Total Clients:	26
	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	8	30.77%
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	25	96.15%

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
Whispering Pines	16	25	**156%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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
Whispering Pines	**2**	**2**	**0**	**2**	**8**	**4**	**7**

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, 2013" was recorded on April 9, 2013, 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 12/01/2013 - 12/31/2013

PROGRAM INFORMATION

Agency Name: **Department of Behavioral health (DBH)**

Type: Corner Stone

Data Quality and Completeness:

Complete and accurate records are needed to ensure quality data. A program's percentage of missing, unknown, invalid and refused all for all required Universal Data are used to evaluate data quality. The higher a program's percentage of missing or erroneous data, the less useful and meaningful that data becomes.

Demographic Data Total Clients: 39

	# Missing	% Missing
Race	0	0.00%
Ethnicity	0	0.00%
Gender	0	0.00%
Veteran	0	0.00%
Disabling condition	4	10.25%
Residence Prior	0	0.00%
length of Stay	1	2.56%
Zip Code	0	0.00%
Housing Status	0	0.00%
Entry Date	0	0.00%
Exit Date	38	97.43%

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
Corner Stone	33	38	*115%

***Typically, programs reporting over 105% of their beds are occupied are failing to exit clients from their HMIS.**

****Typically, programs reporting that less than 65% of their beds are occupied are not entering all clients into their HMIS.**

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
Corner Stone	4	5	1	2	3	2	21

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, 2013" was recorded on April 9, 2013, 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.