



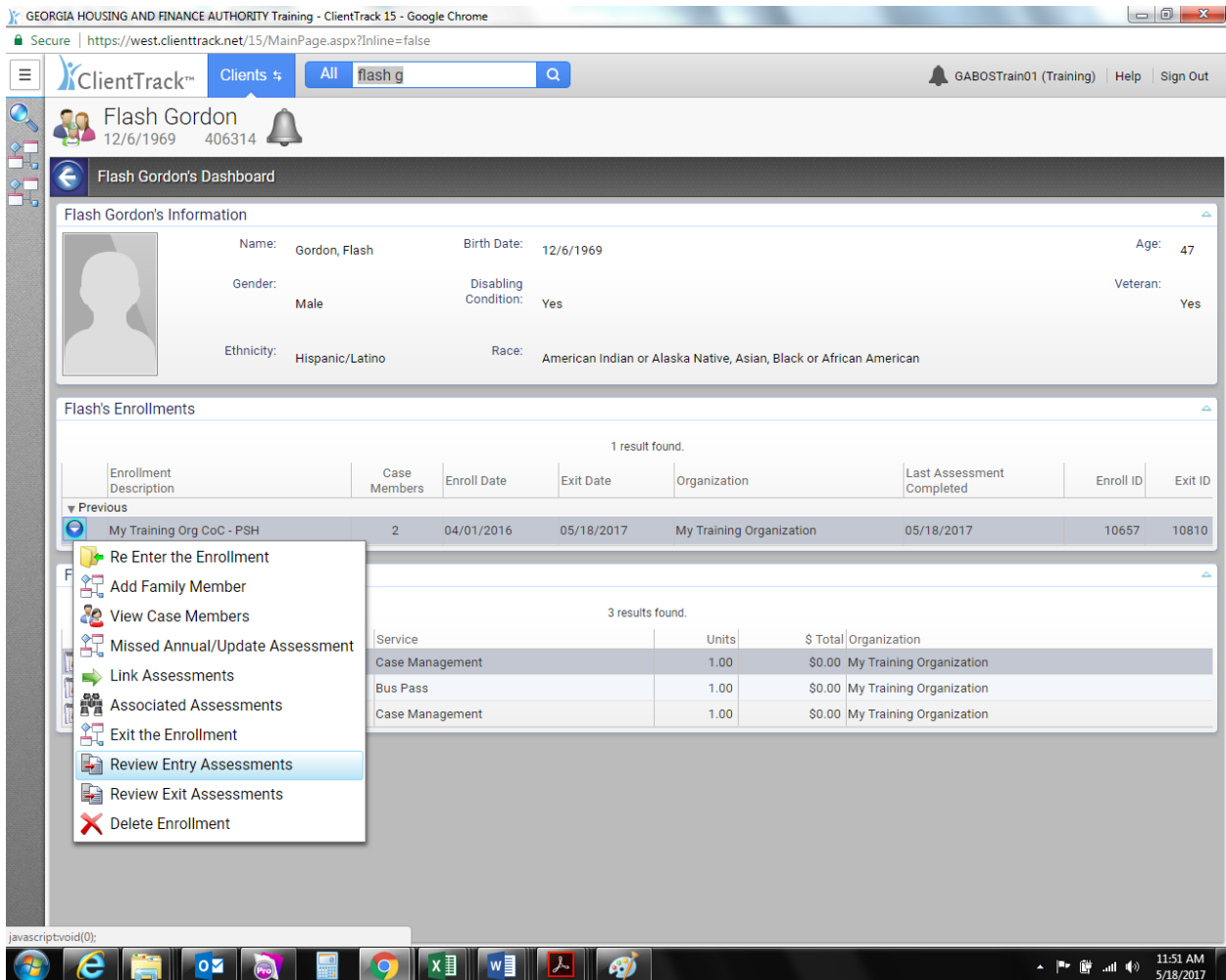
Georgia[®] Department of Community Affairs

Data Quality Clean Up: Q5 Chronic Homelessness

For this question, you will need to go into paper files to answer each field you are pulling an error on. If your actual files for the clients do not have this information, please ask the clients for the correct information. We understand that many may not remember, however like all other data quality questions, this must be under 10%.

First, search and locate the client who is pulling an error.
You will find that information in the detail report under Q5.

When you have their dashboard pulled up, click the blue button and click Review Entry Assessment.



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ClientTrack™ Clients All flash g GABOSTrain01 (Training) Help Sign Out

Flash Gordon
12/6/1969 406314

Flash Gordon's Dashboard

Flash Gordon's Information

Name:	Gordon, Flash	Birth Date:	12/6/1969	Age:	47
Gender:	Male	Disabling Condition:	Yes	Veteran:	Yes
Ethnicity:	Hispanic/Latino	Race:	American Indian or Alaska Native, Asian, Black or African American		

Flash's Enrollments

1 result found.

Enrollment Description	Case Members	Enroll Date	Exit Date	Organization	Last Assessment Completed	Enroll ID	Exit ID
My Training Org CoC - PSH	2	04/01/2016	05/18/2017	My Training Organization	05/18/2017	10657	10810

3 results found.

Service	Units	\$ Total	Organization
Case Management	1.00	\$0.00	My Training Organization
Bus Pass	1.00	\$0.00	My Training Organization
Case Management	1.00	\$0.00	My Training Organization

- Re Enter the Enrollment
- Add Family Member
- View Case Members
- Missed Annual/Update Assessment
- Link Assessments
- Associated Assessments
- Exit the Enrollment
- Review Entry Assessments
- Review Exit Assessments
- Delete Enrollment

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On this screen you will click the green pencil next to HMIS Universal Data. It will most likely show a blue checkmark under Finished, but that does not mean you are in the clear.

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ClientTrack™ Clients All Search

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Assessment Status

Displayed below is the status of the Assessment.

Edit Assessment

Assessment	Finished
HMIS Universal Data	✓
HMIS Barriers	✓
Domestic Violence	✓
Financial	✓
(HOPWA Only) Medical Assistance	
(HOPWA Only) T-Cell Count/Viral Load	
(PATH Only) Path Assessment	
(RHY Only) Entry Assessment	
(RHY Only) Health	
(RHY or SSVH Only) Adult Education Assessment	
(RHY or SSVH Only) Child Education Assessment	
(SSVF Only) Homelessness Prevention	
(SSVF Only) Use of Other Crisis Services	✓
Veteran Details	

Close

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5/18/2017

Next you will see where you will correct data

To make this data correct, you will be in the Living Situation field areas, shown in purple below.

What is consistently missing in DQ reports:

Approximate date homelessness started (3.917.3 in DQ Report Q5)

Regardless of where they stayed last night, number of times client has been on the streets, in ES or SH in the past three years (3.917.4 in DQ Report Q5)

Total number of months homeless on th streets, in ES or SH in the past three years (3.917.5 in DQ Report Q5)

These answers determine chronic homeless status and will affect Q1 Report Validation and ultimately your dedicated bed commitment. If you are dedicated at 10 beds and this report shows 2 dedicated beds in Q1, we assume you have missing information in these fields.

Additionally, based on how you answer these questions for type of residence (the first field in this section), you will find other questions that open up. For example, if you entered institution, you will answer questions based on that, TH as prior night questions will flow based on that. As we have discussed numerous times, this shows if your clients are truly homeless and meet the federal definition.

You can review the 3.917B Flow Chart which will be coming under separate cover. It provides a good walk through on eligibility for the CoC PSH program and answering these questions.

Correct this information and hit SAVE. You can then go out and enter back in OR refresh that same lurking Data Quality Report to ensure the number has lowered.

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Flash Gordon's Dashboard Assessment Status Universal Data Assessment

Housing Status: Category 1 - Homeless

Client Location - Select or enter the CoC code assigned to the geographic area where the head of household is staying at the time of project entry.
Client Location : * GA-500 - Atlanta CoC

Living Situation - Identify the type of residence and length of stay at that residence just prior to (i.e., the night before) program admission.

Type of Residence: * Emergency shelter, including hotel or motel paid for with emergency shelter voucher (1)

Length of stay in the prior living situation: * One month or more, but less than 90 days

Approximate date homelessness started: * 10/03/2016

Regardless of where they stayed last night -- Number of times the client has been on the streets, in ES, or SH in the past three years including today: * Three times

Total number of months homeless on the streets, in ES, or SH in the past three years: * More than 12 months

Health Insurance - Please indicate whether or not the client is covered by health insurance. If so, you will be able to record health insurance sources for the client.

Default Last Insurance Status

Covered by Health Insurance: * Yes

Type	Status	Reason No	Other Coverage
Private	-- SELECT --	-- SELECT --	
Private - Employer	-- SELECT --	-- SELECT --	
Private - Individual	-- SELECT --	-- SELECT --	

Save Cancel

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