

Alameda County Monthly HMIS User Meeting

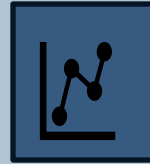
April 2026



Agenda



Introductions



Data Quality Dashboard



HMIS Team Email Update



Upcoming Events

Get your phone ready!





Data Quality Key Areas

Sayed Sadat

The Bigger Picture: A New Approach to Data Quality

Starting in July 2026, Alameda County HMIS will launch a new three-year Data Quality Monitoring Plan for FY 2026–27, 2027–28, and 2028–29.

A key change in this new approach is that partner agencies will take a more active role in monitoring and correcting their own data in HMIS, while HMIS staff continue to provide support.

Today's presentation will introduce some canned reports in HMIS and, explain how they can help agencies improve data quality on five key areas: timeliness, completeness, accuracy, consistency and utilization.

Five Key Areas of Data Quality

1. Timeliness –

Measures how quickly data is entered after an event.
Goal: Enter data within 3 days of client interaction.
Late entries (after 3 days) don't meet the standard.

2. Completeness –

Ensures all required fields are properly filled out.
Missing/unknown data lowers report accuracy.
Common fields: SSN, Date of Birth, Race, etc.

3. Accuracy –

Data should reflect the true, up-to-date client situation.
Major issue: Duplicate open enrollments.
Example: Second enrollment created instead of updating existing one.

Five Key Areas of Data Quality

4. Consistency –

Data must be recorded uniformly across programs.
Prevents duplicates/conflicts from slight name variations.
Ensures smooth cross-agency coordination.

5. Utilization –

- Tracks how well housing/services are used.
- Goal: Keep usage rates above 80%.
- Underutilization signals inefficiencies or barriers to access.

Five Key Areas & Five Questions

Timeliness – Are data entries made quickly after events happen?

Completeness – Are all required fields filled in correctly?

Accuracy – Is the information correct and up-to-date?

Consistency – Is data entered the same way across programs?

Utilization – Are housing and service resources being fully used?

Introduction to a Canned Report (HUD 225)

The HUD 225 report reviews whether HMIS data is filled in correctly, reflects what is really happening with clients, is entered on time, and is reliable enough for HUD reports and program management.

For example, on completeness, it tracks:

Q2. Personally Identifiable Information (PII)					
Program Applicability: All Projects					
Data Element	Client Doesn't Know/Prefers Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Name (3.01)	24	12	21	57	0.30%
Social Security Number (3.02)	1242	620	318	2180	11.28%
Date of Birth (3.03)	11	21	145	177	0.92%
Race and Ethnicity (3.04)	106	119		225	1.16%
Overall Score				2425	12.55%

Introduction of a DQ Canned Report (HUD 225)

Another example, on timeliness, the report tracks:

Q6. Timeliness		
Program Applicability: All Projects		
Time for Record Entry	Number of Project Start Records	Number of Project Exit Records
< 0 days	222	279
0 days	3586	891
1-3 days	494	185
4-6 days	191	86
7-10 days	150	68
11+ days	393	235

**Thanks for Your Attention!
Any Questions?**



Completeness

Andy Duong

Completeness

This section assesses the extent to which all required HUD Data are accurately captured, validated, and documented within the system. It also evaluates the completeness and accuracy of all intake and exit data collection and entry processes. Comprehensive and reliable HMIS data is essential for producing an accurate analysis of the characteristics, patterns, and scale of homelessness.

A very useful report that tracks incomplete data is the APR, also known as [HUDX-227-AD] Annual Performance Report [FY 2026]. It can be found in the Report Library under HUD reports listed as [HUDX-227-AD] Annual Performance Report [FY 2026]

REPORT LIBRARY		EXPLORE	DATA ANALYSIS
HUD Reports		11 report(s) ^	
[HUDX-111] HUD CSV / XML Program Data Export [FY 2024]	Retired	★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-111] HUD CSV / XML Program Data Export [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-123] Housing Inventory (HIC) Supplemental [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-224] PATH Annual Report [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-225] HMIS Data Quality Report [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-227] Annual Performance Report [FY 2026]		▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-228] ESG CAPER [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-230] Shelter Count PIT [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-231] LSA Export - Project-Focused LSA [FY 2025]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-235] CE APR [FY 2026]		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾
[HUDX-236] LSA - Project Descriptor HDX Upload Test [FY 20...		★ ▶ RUN	📅 SCHEDULE MORE INFO ▾

Disabling Condition Error

The disabling condition errors shown in the photos are examples of data quality errors and incomplete data.

DISABLING CONDITIONS AND BARRIERS	
Disabling Condition	No
Physical Disability	Yes Long Term Select
Developmental Disability	No
Chronic Health Condition	Client does
HIV - AIDS	Client prefe
Mental Health Disorder	No
Substance Use Disorder	No

DISABLING CONDITIONS AND BARRIERS	
Disabling Condition	No
Physical Disability	Yes Long Term Select
Developmental Disability	No
Chronic Health Condition	Client does
HIV - AIDS	Client prefe
Mental Health Disorder	No
Substance Use Disorder	No

The discrepancy lies where the status of the client's Disabling Condition is NO, but, yet there is a Physical Disability present and is listed as Yes; The correction should be changing the Disabling Condition value from NO to Yes.

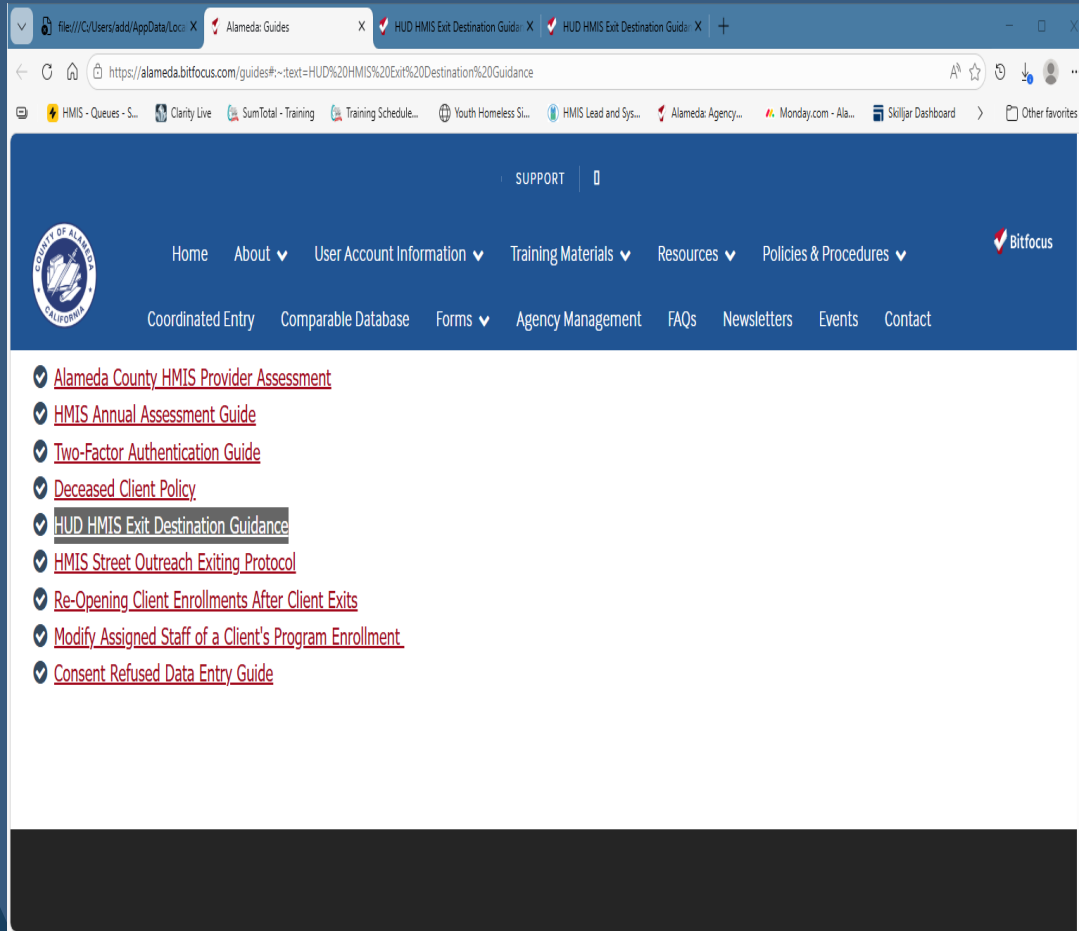
Missing or incomplete data are the values listed under **Chronic Health Condition** as *Client doesn't know* and **HIV - AIDS** as *Client prefers not to answer*

Exit Destination Error and Exit Destination Guidance

This validation identifies records in which the Exit Destination data element has not been populated with a complete, HUD-compliant response on the program exit screen. For the purposes of this check, the following responses are classified as missing or incomplete per HMIS Data Standards: “No Exit Interview Completed,” “Client Doesn’t Know,” “Client Refused,” and “Data Not Collected.”

The HMIS website lists resources to HUD’s Exit Destination Guidance that describes each Exit Destination in detail and explains when to use each one appropriately.

Alameda: Guides



Alameda County Continuum of Care

HUD HMIS Exit Destination Guidance

Purpose: The following is a table that includes Exit Destination options which are used when a client leaves a project. The options are separated into four categories:

- Permanent
- Temporary
- Institutional
- Other **IMPORTANT NOTE:** Destinations in the **Other** category should only be used as a last resort.

For clients who will be staying with family or friends, select the response that includes the expected tenure of the destination (primary or temporary).

For rental by client and owned by client, select the response that includes the type of housing subsidy, if any, the client will be receiving.

A housing subsidy may be tenant-, project- or sponsor-based and provides ongoing assistance to reduce rent burden. This includes either a housing subsidy provided through the Veterans Affairs Supportive Housing (VASH) program or other housing subsidy. Other housing subsidies may include:

- HUD-funded subsidy (for example, public housing, Housing Choice Voucher or Section 8)
- Other housing subsidy (for example, state rental assistance voucher)

If a client exits without providing destination information to project staff, the "No exit interview completed" response value should be used; in such instances, destination information will be considered missing.

The first column lists the destination options by category. The second column explains each destination.

Homeless Destinations	Explanation
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) The client was, or will be living outside or any place not meant for human habitation (e.g. a vehicle, abandoned building, bus/train/subway/airport station, campsite)	The client was, or will be living outside or any place not meant for human habitation (e.g. a vehicle, abandoned building, bus/train/subway/airport station, campsite)

Timeliness

Suzanne Campillo



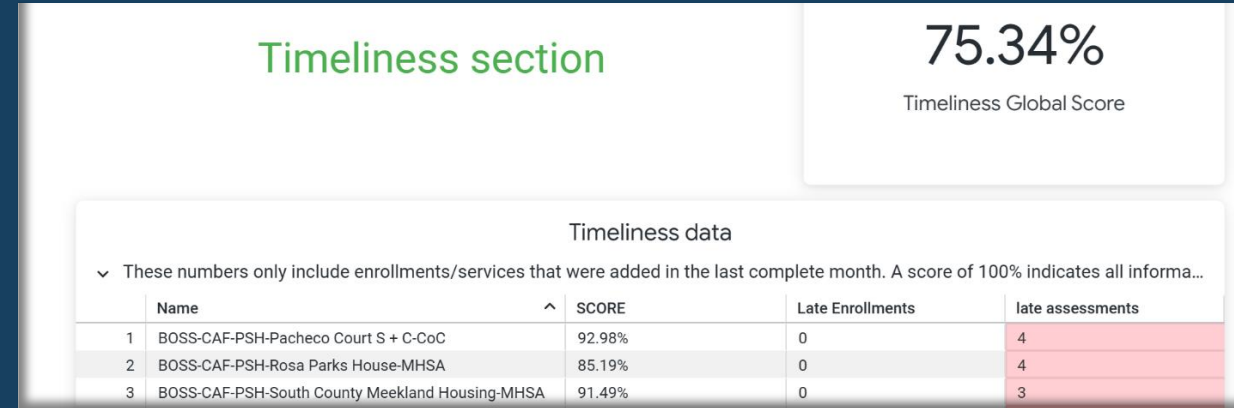
Timeliness

The **Timeliness** section includes tables that track time-sensitive data entry:

- HMIS time-stamps each record at the moment it is saved.
- A record is considered late if it is entered more than 3 days after the event occurred.

Annual Assessments

Programs that complete annual assessments are expected to do so within 30 days of the Head of Household's enrollment anniversary. An annual assessment is considered late if it is not completed within that window.



Q6e. Data Quality: Timeliness		
Program Applicability: All Projects		
Time for Record Entry	Number of Project Start Records	Number of Project Exit Records
< 0 days	2	4
0 days	125	4
1-3 days	0	0
4-6 days	0	0
7-10 days	0	0
11+ days	9	78

Timeliness [GNRL-409] Annual Assessment Overview

Annual Assessment Status(es)

Choose...

All

Completed

Completed Out of Range

Past Due

Due

Assessment Window Opening in 30 Days

Not Due

Enrolled Less than 1 Year

Data Issue

Exited Before HoH's 1st Anniversary

Report Start Date: 01/01/2025

Report Output Format: Web Page PDF Excel


Annual Assessment Overview
Beez Kneez
Multiple Programs
Multiple Statuses
Date Range: 01/01/2025 thru 04/20/2026

BK Outreach

Annual Assessment Overview				
Annual Assessment Status	Completed Out of Range	Past Due	Due	Data Issue
# of Assessments	0	341	4	6

Client Detail													
Unique ID	Client Name	Relationship to HoH	Start Date	Exit Date	LOS	Expected Annual Assessment Count	Completed Annual Assessment Count	Last Annual Assessment Date	Last Annual Assessment Status	Next Annual Assessment Due	Next Annual Assessment Status	Assigned Staff	More Info
41EDC895D	Bawdy, Bz	Self	01/01/2018	-	3,032	8	0	-	Past Due	01/01/2027	Not Due	A. 6* P. Crosby*	More Info
BC47A2413	Jay, Rachel	Head of household's spouse or partner	04/26/2018	-	2,917	0	0	-	Data Issue	-	-	B. Keeper	More Info
555B1CF8B	Mason, Andrew	Self	01/24/2018	-	3,009	8	0	-	Past Due	01/24/2027	Not Due	T. 10	More Info
0958BE035	Mason, Alicia	Head of household's child	01/24/2018	-	3,009	8	0	-	Past Due	01/24/2027	Not Due	T. 10	More Info
0B9F9A7BD	Boy, Jim	Self	08/10/2017	-	3,176	8	1	-	Past Due	08/10/2026	Not Due	T. 20	More Info

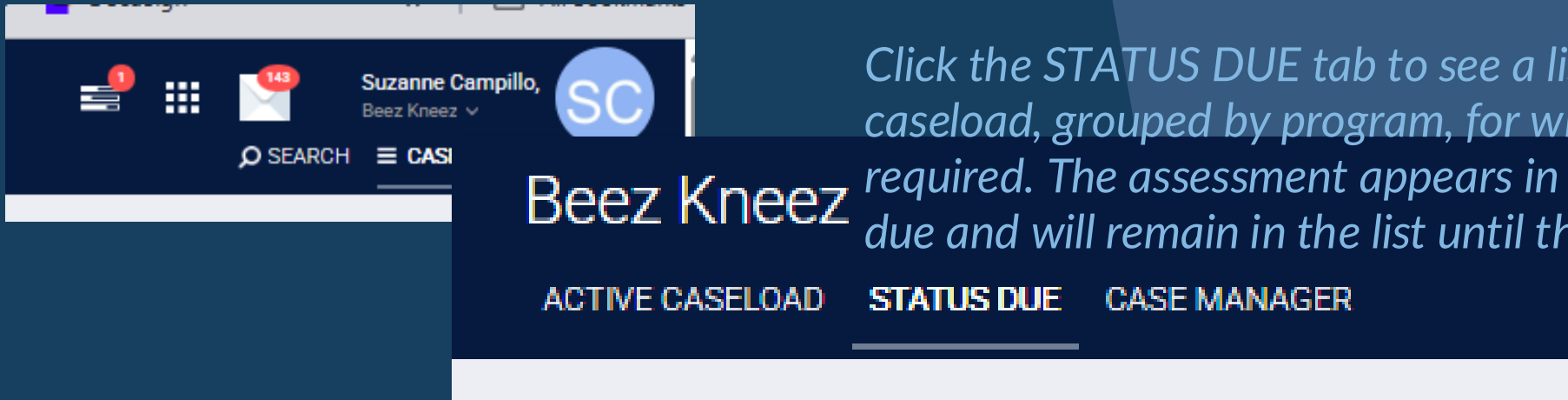
This report provides information about Annual Assessment compliance by examining currently completed and expected assessments in relation to Annual Assessment Anniversary Dates as outlined in the HMIS Reporting Glossary.



20

Timeliness Status Due

The CASELOAD tab provides a convenient way for you to view your active caseload



Click the *STATUS DUE* tab to see a list of enrollments in your caseload, grouped by program, for which annual assessments are required. The assessment appears in this list ten days before it is due and will remain in the list until the assessment is completed.

STATUS DUE

SEARCH

Program: BDC Emergency Shelter

Client	Start Date	Last Status Date	Assessment Due	Household Members
Madison Smith	09/14/2022	02/19/2025	09/14/2025	1
D8cf8213c Refused	09/27/2022	09/27/2024	09/27/2025	1

Questions?



HMIS Team Email Update



→ The hmissupport@hmis.org email will be retired soon.

→ Please use the updated email hmissupport@acgov.org to connect with the Alameda County HMIS team.

→ The updated email address is listed on the Alameda County HMIS website alameda.bitfocus.com.

Upcoming Events



JOIN US!

- **Alameda County HMIS Q&A Session**
May 12th at 10 AM
- **User and Liaison Meeting**
May 28th at 10 AM and 11 AM
- **General Refresher Training**
April 28th @ 10a



Alameda County Monthly HMIS Liaison Meeting

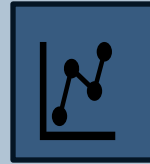
April 2026



Agenda



Introductions



Data Quality Dashboard



HMIS Team Email Update



Upcoming Events

Get your phone ready!



Data Quality Dashboard





DQ and Accuracy

Sayed Sadat

The Bigger Picture: A New Approach to Data Quality

Starting in July 2026, Alameda County HMIS will launch a new three-year Data Quality Monitoring Plan for FY 2026–27, 2027–28, and 2028–29.

A key change in this new approach is that partner agencies will take a more active role in monitoring and correcting their own data using the DQ Dashboard in HMIS, while HMIS staff continue to provide support.

Today's presentation will introduce the DQ Dashboard, explain its three sections, and show how it can help agencies improve data quality through easier review, identification of issues, and timely corrections.

What is the DQ Dashboard?

The DQ Dashboard is an HMIS tool that helps us monitor data quality. It looks at three main areas:

1. Completeness
2. Accuracy and Consistency
3. Timeliness

In other words, it helps us see whether required data is filled in, whether it makes sense, and whether it was entered on time. This matters because high-quality data leads to better reporting, better decision-making, and better services for clients.

Why is the DQ Dashboard important?

The DQ Dashboard matters because good data supports good services. When data is complete, accurate, and timely:

1. Staff can make better decisions
2. Agencies can identify and fix issues sooner
3. Reporting is more reliable
4. Community-wide data is stronger
5. Clients receive better coordinated services
6. Agencies can take a more active role in monitoring and improving their own data

How to Access the DQ Dashboard?

- A. Log into HMIS and open Reporting
- B. Click DATA ANALYSIS
- C. Select Alameda Clarity System Reports
- D. Scroll to Data Quality
- E. Choose the dashboard you need and click RUN
- F. Apply filters: Agency Name, Reporting Period, Project Type, Program Name

Accuracy and Consistency

This section helps identify records where data does not match or does not make sense together. It includes:

1. Accuracy Errors (drill-downs and percentages)
2. Prior Living Situation Errors
3. And Overlapping enrollments in the same program

Accuracy and Consistency: First Tile – Accuracy Errors

The First Tile:

- Flags 14 types of client-level data conflicts across programs
- Each row represents a program
- Each column represents an error type
- Click a highlighted cell to drill down and view the specific records causing the error.

Accuracy and Consistency: First Tile: Accuracy Errors

The 14 types of errors:

1. Cash/Benefits Conflict (Entry Screen)
2. Cash/Benefits Conflict (Exit Screen)
3. Date of Birth BEFORE Project Start
4. Disabling Condition Error
5. Employment/Income Conflict (Entry Screen)
6. Employment/Income Conflict (Exit Screen)
7. Households with More than One HoH
8. Housing Move-in Date Error
9. Housing Status and Living Situation Conflict
10. Enrollment with Invalid HoH
11. Project End BEFORE Project Start
12. Project Start Date BEFORE Grant Date
13. Project Exit Date AFTER Grant Date
14. Move-in Date / Destination Conflict

Program name	Cash/Benefits Conflict (Entry Screen)	Cash/Benefits Conflict (Exit Screen)	Date of Birth BEFORE Project Start	Disabling Condition Error	Employment/Income
1	0	0	0	0	0
2	0	0	0	0	0
3	0	0	0	0	X
4	0	0	0	0	0
5	0	0	0	0	0
6	0	0	0	0	0
7	0	0	0	0	0
8	0	0	0	0	0
9	0	0	0	0	0
10	0	0	0	0	0

Accuracy and Consistency: Second Tile – Prior Living Situation Errors

This Tile:

- Reviews whether prior living situation data is consistent

Checks:

1. Start date vs. project start date
2. Start date vs. times/months homeless
3. Total months homeless vs. reported timeline

	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		0	10	3
2		0	6	2
3		0	0	1
4		0	11	1
5		0	16	1
6		0	15	0
7		0	15	2
8		1	53	8
9		0	14	2
10		0	0	0
11		0	2	1
12		0	1	1
13		0	12	1
14		0	0	0

Accuracy and Consistency: Third Tile – Overlapping Enrollments in the Same Program

The third tile:

- Identifies enrollments with overlapping dates
- Displays key enrollment details for review
- Helps users spot and correct possible errors
- Filter by agency or program for best results

Overlapping enrollments in the same program

> This table works best when the dashboard is filtered by agency, otherwise it will hit a ROW LIMIT error (check last column). Please filter by program or agency to see a complete list of overlaps.

Client ID	Client Full Name	Program Name	Enrollment ID	Project Start Date	Project Exit Date	Overlapping Start Date	Overlapping Exit Date	Row Limit
				2019-07-08	∅	2025-09-30	∅	∅



Completeness

Andy Duong

Completeness

This section assesses the extent to which all required HUD Data are accurately captured, validated, and documented within the system. It also evaluates the completeness and accuracy of all intake and exit data collection and entry processes. Comprehensive and reliable HMIS data is essential for producing an accurate analysis of the characteristics, patterns, and scale of homelessness.

Missing data errors (with drill-downs)

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

Missing Data Section

83.37%
Completeness 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	Count Client IDs	Client name error	SSN Error	Date of Birth Error	Race/Eth...	Gender Error	Veteran status error	Relationship to HOH error
1 AbS-CA-PSH-Embark Apartments VHHP-A1	92.6%	35	0	2	0	1	0	0	0
2 AbS-CA-PSH-Embark Apartments-VASH	0	27	0	0	0	0	0	0	0
3 AbS-CAF-HP-Bringing Families Home Preventio...	87.5%	16	0	2	0	0	0	0	0
4 AbS-CAF-PSH- Crescent Grove - HHC/NPLH	100.0%	27	0	0	0	0	0	0	0
5 AbS-CAF-PSH- Doug Ford Senior Apartments - ...	100.0%	47	0	0	0	0	0	0	0
6 AbS-CAF-PSH- ECV Scattered Site - CoC	100.0%	33	0	0	0	0	0	0	0
7 AbS-CAF-PSH- Housing Health Subsidy - Pool - ...	77.3%	52	0	5	0	0	0	2	0
8 AbS-CAF-PSH- RALE Voucher - HCSA	97.0%	703	0	0	0	0	0	0	0

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	Count Client IDs	Client Name Error	SSN Error (excluding Outreach/NbN Shelters)	SSN Error (Outreach/NbN Shelters only)	Date o
1 AbS-CA-PSH-Embark Apartments VHHP-A1	92.6%	35	0.0%	5.7%	0.0%	0.0%
2 AbS-CA-PSH-Embark Apartments-VASH	0	27	0.0%	0.0%	0.0%	0.0%
3 AbS-CAF-HP-Bringing Families Home Preventio...	87.5%	16	0.0%	12.5%	0.0%	0.0%
4 AbS-CAF-PSH- Crescent Grove - HHC/NPLH	100.0%	27	0.0%	0.0%	0.0%	0.0%
5 AbS-CAF-PSH- Doug Ford Senior Apartments - ...	100.0%	47	0.0%	0.0%	0.0%	0.0%
6 AbS-CAF-PSH- ECV Scattered Site - CoC	100.0%	33	0.0%	0.0%	0.0%	0.0%
7 AbS-CAF-PSH- Housing Health Subsidy - Pool - ...	77.3%	52	0.0%	9.6%	0.0%	0.0%
8 AbS-CAF-PSH- RALE Voucher - HCSA	97.0%	703	0.0%	2.7%	0.0%	0.0%
9 AbS-CAF-PSH-Alameda County Impact-CoC	98.8%	85	0.0%	1.2%	0.0%	0.0%
10 AbS-CAF-PSH-Allied Housing Inc. Mission Bell...	0	4	0.0%	0.0%	0.0%	0.0%
11 AbS-CAF-PSH-Bridgeway SHP-CoC	95.7%	23	0.0%	4.3%	0.0%	0.0%
12 AbS-CAF-PSH-Carmen Avenue (HUD)-CoC	100.0%	13	0.0%	0.0%	0.0%	0.0%
13 AbS-CAF-PSH-Carmen Avenue MHP-SHP	50.0%	6	0.0%	50.0%	0.0%	0.0%
14 AbS-CAF-PSH-City Center-NPLH	93.3%	15	0.0%	0.0%	0.0%	0.0%
15 AbS-CAF-PSH-City Center-VASH	100.0%	8	0.0%	0.0%	0.0%	0.0%
16 AbS-CAF-PSH-City Center-VHHP	100.0%	13	0.0%	0.0%	0.0%	0.0%

The table on the right 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.

A very useful report that tracks incomplete data is the APR, also known as [HUDX-227-AD] Annual Performance Report [FY 2026]. It can be found in the Report Library under HUD reports listed as [HUDX-227-AD] Annual Performance Report [FY 2026]

REPORT LIBRARY EXPLORE DATA ANALYSIS

HUD Reports 11 report(s) ^

[HUDX-111] HUD CSV / XML Program Data Export [FY 2024]	Retired	★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-111] HUD CSV / XML Program Data Export [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-123] Housing Inventory (HIC) Supplemental [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-224] PATH Annual Report [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-225] HMIS Data Quality Report [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-227] Annual Performance Report [FY 2026]		🔍	🔄	📅	SCHEDULE	MORE INFO
[HUDX-228] ESG CAPER [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-230] Shelter Count PIT [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-231] LSA Export - Project-Focused LSA [FY 2025]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-235] CE APR [FY 2026]		★	🔄	📅	SCHEDULE	MORE INFO
[HUDX-236] LSA - Project Descriptor HDX Upload Test [FY 20...		★	🔄	📅	SCHEDULE	MORE INFO

HUD Annual Performance Report [FY 2026]

****Alameda County CE Agency (Test)**
 Date Range: 01/01/2026 thru 12/31/2026
 Agency cat. filter: Agency CoC
 Enrollment CoC Filter: No
 Funding Criteria: Not Based on Funding Source
 Client ID Selection: Clarity Unique Identifier

Q6a. Data Quality: Personally Identifiable Information
 Program Applicability: All Projects

Data Element	Client Doesn't Know/Prefer Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Name (3.01)	4	1	10	15	1.81%
Social Security Number (3.02)	39	10	143	192	23.13%
Date of Birth (3.03)	4	6	22	32	3.86%
Race/Ethnicity (3.04)	29	57		86	10.36%
Overall Score				272	32.77%

Tue Apr 21 09:46:41 PM 2026 3 / 67
 Powered By CLARITY HUMAN SERVICES

Q6b. Data Quality: Universal Data Elements
 Program Applicability: All Projects

Data Element	Client Doesn't Know/Prefer Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Veteran Status (3.07)	3	4	1	8	0.98%
Project Start Date (3.10)			9	9	1.08%
Relationship to Head of Household (3.15)		3	84	85	10.24%
Enrollment CoC (3.16)		0	0	0	0.00%
Disabling Condition (3.08)	8	15	58	81	9.76%

Tue Apr 21 09:46:41 PM 2026 4 / 67
 Powered By CLARITY HUMAN SERVICES

Q6c. Data Quality: Income and Housing Data Quality
 Program Applicability: All Projects

Data Element	Client Doesn't Know/Prefer Not to Answer	Information Missing	Data Issues	Total	% of Issue Rate
Destination (3.12)	0	2		2	100.00%
Income and Sources (4.02) at Start	9	41	5	55	8.66%
Income and Sources (4.02) at Annual Assessment	0	585	0	585	100.00%
Income and Sources (4.02) at Exit	0	2	0	2	100.00%

Tue Apr 21 09:46:41 PM 2026 5 / 67
 Powered By CLARITY HUMAN SERVICES

Q6d. Data Quality: Chronic Homelessness
 Program Applicability: ES-EE, ES-NbN, SH, Street Outreach, TH, PH(All), CE, SSO, Day Shelter & HP

Entering into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate date this episode Missing	Number of times (3.917.4) DK/PNTA/missing	Number of months (3.917.5) DK/PNTA/missing	% of records unable to calculate
ES-EE, ES-NbN, SH, Street Outreach	353			17	42	33	13.60%
TH	16	0	0	0	0	0	0.00%
PH (all)	107	1	2	0	4	3	8.41%
CE	126	0	4	0	4	1	7.14%
SSO, Day Shelter, HP	31	0	2	0	0	3	16.13%
Total	633						11.22%

Tue Apr 21 09:46:41 PM 2026 6 / 67
 Powered By CLARITY HUMAN SERVICES

Disabling Condition Error

The disabling condition errors shown in the photos are examples of data quality errors and incomplete data.

DISABLING CONDITIONS AND BARRIERS	
Disabling Condition	No
Physical Disability	Yes Long Term Select
Developmental Disability	No
Chronic Health Condition	Client does
HIV - AIDS	Client prefe
Mental Health Disorder	No
Substance Use Disorder	No

DISABLING CONDITIONS AND BARRIERS	
Disabling Condition	No
Physical Disability	Yes Long Term Select
Developmental Disability	No
Chronic Health Condition	Client does
HIV - AIDS	Client prefe
Mental Health Disorder	No
Substance Use Disorder	No
DOMESTIC VIOLENCE INQUIRY	
Survivor of Domestic Violence: Have you experienced a past or current relationship that was controlling and/or abusive? This includes domestic violence, dating violence, sexual assault, stalking and human trafficking.	No
MONTHLY INCOME AND SOURCES	
Income from Any Source	No
NON-CASH BENEFITS	

The discrepancy lies where the status of the client's Disabling Condition is NO, but, yet there is a Physical Disability present and is listed as Yes; The correction should be changing the Disabling Condition value from NO to Yes.

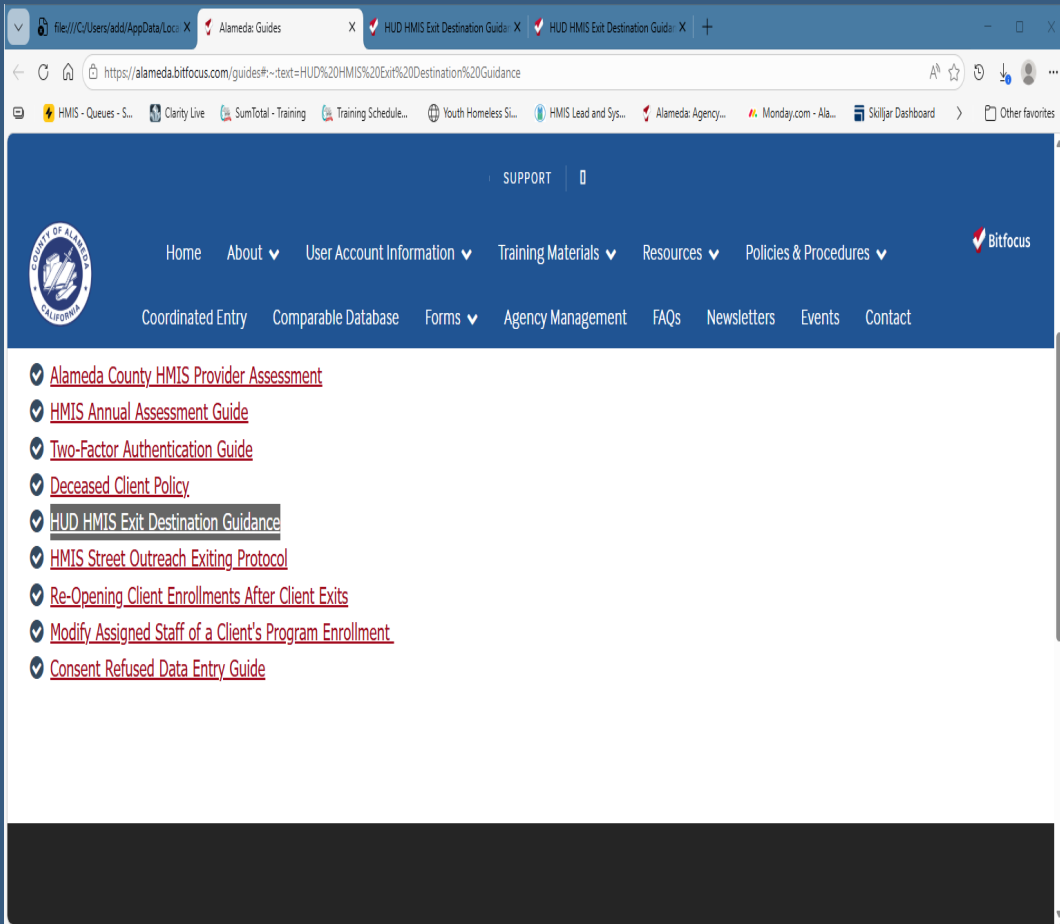
Missing or incomplete data are the values listed under Chronic Health Condition as *Client doesn't know* and HIV - AIDS as *Client prefers not to answer*

Exit Destination Error and Exit Destination Guidance

This validation identifies records in which the Exit Destination data element has not been populated with a complete, HUD-compliant response on the program exit screen. For the purposes of this check, the following responses are classified as missing or incomplete per HMIS Data Standards: “No Exit Interview Completed,” “Client Doesn’t Know,” “Client Refused,” and “Data Not Collected.”

The HMIS website lists resources to HUD’s Exit Destination Guidance that describes each Exit Destination in detail and explains when to use each one appropriately.

Alameda: Guides



Alameda County Continuum of Care HUD HMIS Exit Destination Guidance

Purpose: The following is a table that includes Exit Destination options which are used when a client leaves a project. The options are separated into four categories:

- Permanent
- Temporary
- Institutional
- Other **IMPORTANT NOTE:** Destinations in the **Other** category should only be used as a last resort.

For clients who will be staying with family or friends, select the response that includes the expected tenure of the destination (primary or temporary).

For rental by client and owned by client, select the response that includes the type of housing subsidy, if any, the client will be receiving.

A housing subsidy may be tenant-, project- or sponsor-based and provides ongoing assistance to reduce rent burden. This includes either a housing subsidy provided through the Veterans Affairs Supportive Housing (VASH) program or other housing subsidy. Other housing subsidies may include:

- HUD-funded subsidy (for example, public housing, Housing Choice Voucher or Section 8)
- Other housing subsidy (for example, state rental assistance voucher)

If a client exits without providing destination information to project staff, the "No exit interview completed" response value should be used; in such instances, destination information will be considered missing.

The first column lists the destination options by category. The second column explains each destination.

Homeless Destinations	Explanation
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) The client was, or will be living outside or any place not meant for human habitation (e.g. a vehicle, abandoned building, bus/train/subway/airport station, campsite)	The client was, or will be living outside or any place not meant for human habitation (e.g. a vehicle, abandoned building, bus/train/subway/airport station, campsite)

Timeliness

Suzanne Campillo



Timeliness

The **Timeliness** section includes tables that track time-sensitive data entry:

- HMIS time-stamps each record at the moment it is saved.
- A record is considered late if it is entered more than 3 days after the event occurred.

Annual Assessments

Programs that complete annual assessments are expected to do so within 30 days of the Head of Household's enrollment anniversary. An annual assessment is considered late if it is not completed within that window.

Timeliness section

75.34%
Timeliness Global Score

Timeliness data

∨ These numbers only include enrollments/services that were added in the last complete month. A score of 100% indicates all informa...

	Name	SCORE	Late Enrollments	late assessments
1	BOSS-CAF-PSH-Pacheco Court S + C-CoC	92.98%	0	4
2	BOSS-CAF-PSH-Rosa Parks House-MHSA	85.19%	0	4
3	BOSS-CAF-PSH-South County Meekland Housing-MHSA	91.49%	0	3

Timeliness [GNRL-409] Annual Assessment Overview

Annual Assessment Status(es)

- Choose...
- All
- Completed
- Completed Out of Range
- Past Due
- Due
- Assessment Window Opening in 30 Days
- Not Due
- Enrolled Less than 1 Year
- Data Issue
- Exited Before HoH's 1st Anniversary

Report Start Date 01/01/2025

Report Output Format Web Page PDF Excel

Beez Kneez
Multiple Programs
Multiple Statuses
Date Range: 01/01/2025 thru 04/20/2026


Annual Assessment Overview

BK Outreach

Annual Assessment Overview				
Annual Assessment Status	Completed Out of Range	Past Due	Due	Data Issue
# of Assessments	0	341	4	6

Client Detail													
Unique ID	Client Name	Relationship to HoH	Start Date	Exit Date	LOS	Expected Annual Assessment Count	Completed Annual Assessment Count	Last Annual Assessment Date	Last Annual Assessment Status	Next Annual Assessment Due	Next Annual Assessment Status	Assigned Staff	More Info
41EDC895D	Bawdy, Bz	Self	01/01/2018	-	3,032	8	0	-	Past Due	01/01/2027	Not Due	A. 6* P. Crosby*	More Info
BC47A2413	Jay, Rachel	Head of household's spouse or partner	04/26/2018	-	2,917	0	0	-	Data Issue	-	-	B. Keeper	More Info
555B1CF8B	Mason, Andrew	Self	01/24/2018	-	3,009	8	0	-	Past Due	01/24/2027	Not Due	T. 10	More Info
0958BE035	Mason, Alicia	Head of household's child	01/24/2018	-	3,009	8	0	-	Past Due	01/24/2027	Not Due	T. 10	More Info
0B9F9A7BD	Boy, Jim	Self	08/10/2017	-	3,176	8	1	-	Past Due	08/10/2026	Not Due	T. 20	More Info

This report provides information about Annual Assessment compliance by examining currently completed and expected assessments in relation to Annual Assessment Anniversary Dates as outlined in the HMIS Reporting Glossary.



49

Timeliness: Bed Utilization for ES and TH programs

How utilization is calculated

- Total Bed Nights = (number of beds) × (number of days in the reporting period)

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	AbS-NYA-TH-Project Independence-BH	Transitional Housing	31	56.0	1,736	1,245	71.7%	40.2
2	ADITR-OF-TH- ArleneAnn House-CoC	Transitional Housing	31	6.0	186	209	112.4%	6.7
3	ADITR-OF-TH-Family Homeless Challenge-CoO	Transitional Housing	31	8.0	248	197	79.4%	6.4

HUD's acceptable range is 65% - 105% for ES/TH programs.

For Utilization outside of this range ->

- Verify program enrollment numbers [GNRL-106] Program Roster
- Verify program inventory [HUDX-123] Housing Inventory (HIC) Supplemental [FY 2026]

Need adjustments to inventory? Reach out to hmissupport@acgov.org

Timeliness: Bed Utilization for PSH programs

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 SAHA-OA-PSH-Ancora Place-NPLH	PH - Permanent Supportive Housing (disability re...	31	25.0	775	775	100.0%	25.0
2 SAHA-MAF-PSH-Redwood Hill Townhome-CoC	PH - Permanent Supportive Housing (disability re...	31	16.0	496	496	100.0%	16.0

HUD's acceptable range is 85% - 105% for PSH programs.

For Utilization outside of this range ->

- Verify program enrollment numbers [GNRL-106] Program Roster
- Verify program inventory [HUDX-123] Housing Inventory (HIC) Supplemental [FY 2026]

Need adjustments to inventory? Reach out to hmissupport@acgov.org

Data Quality Dashboard: Next Steps

1. Run the Dashboard
2. Review the data for your agency by Wednesday May 20, 2026
3. Send feedback to HMISsupport@acgov.org
 - A. Impression of dashboard
 - B. Agree with data on dashboard

Questions?



HMIS Team Email Update



---> The hmissupport@hmis.org email will be retired soon.

---> Please use the updated email hmissupport@acgov.org to connect with the Alameda County HMIS team.

---> The updated email address is listed on the Alameda County HMIS website alameda.bitfocus.com.

Upcoming Events



JOIN US!

- **Alameda County HMIS Q&A Session**
May 12th at 10 AM
- **User and Liaison Meeting**
May 28th at 10 AM and 11 AM
- **General Refresher Training**
April 28th @ 10a

