

Supportive Services for Veteran Families (SSVF) Grantee Webinar

Data Quality Reports: Assessment & Improvement / Quarterly Certification Process

February 11, 2016

Webinar Format

- Webinar will last approximately 1.5 hours
- Participants' phone connections are “muted” due to the high number of callers
 - **Questions can be submitted during the webinar using the Q&A function**
- Questions can also be submitted anytime to [SSVF@va.gov](mailto:ssvf@va.gov)

Presenters & Agenda

- Linda Southcott, SSVF Deputy Director
 - Welcome & Introductions
- Molly McEvilly, Senior Analyst, Abt Associates
 - HMIS Data Requirements for SSVF Grantees
 - VA Repository Data Quality (DQ) Reports
- Lindsay Hill, SSVF Regional Coordinator
 - Quarterly Certification Process

The Importance of Data Quality

- Without accurate data, there is no way to track progress in ending Veteran homelessness
- Veteran programs in general and SSVF in particular are under intense scrutiny
- HMIS data uploaded to the Repository is the only way VA can assess the effectiveness of your program and SSVF as a whole
- Reporting on all VA homeless programs is generated on the 11th of every month – it is critical that SSVF data are current and accurate

***“Without data, you're just
another person with an opinion.”***

~ W. Edwards Deming

SSVF Data Quality Expectations

- Collect and enter all client data into HMIS in a timely manner
 - By the time you upload, all data through the end of the previous month must be in HMIS
- Review data quality reports and correct what you can
 - There is some information that you must have in order to enroll a client in SSVF – those fields should have 100% data quality
 - For other data, perfection may not be possible
- Follow up with clients who seem to ‘disappear’

HMIS Data Requirements for Grantees

- Client data must be exported from HMIS and uploaded to the Repository no later than the 3rd business day of each month
- Grantees must review data quality reports and make corrections in HMIS as needed
- If overall data quality score is below 95% or individual fields are below the threshold, grantees must
 - Upload corrections on or before the 10th day of the month
- Grantees who receive a Duplication of Services report must review and verify that TFA limits are not being exceeded

Data Quality Report – Summary

- Check to see if corrections are required
 - Data quality below 95%
 - Any fields that are below data quality thresholds
- Verify that the export period covers the entire report period

Repository Upload Summary

Sample SSVF Program

Upload 2/1/2016 8:00:00 AM

Upload status Corrections required (see note at bottom of page)

Data quality score	99.1%	Unsat fields	9
Export date	2/1/2016		
Export period	10/1/2015 to 2/1/2016		
Report period	10/1/2015 to 1/31/2016		

Data Quality Report – Participant Summary

- Check to make sure that basic counts of clients and housing outcomes are consistent with your records
- VERIFY TFA TOTALS – without QPRs, this is the only information VA has about the overall proportion of TFA provided under HP and RRH
- If numbers are not accurate: figure out why, correct, and re-upload

Participant Summary	Total	HP	RRH
Total persons served	101	31	70
Veterans	76	19	57
Children	18	9	9
Other non-Veterans	7	3	4
Persons entering	42	11	31
Persons exiting	72	22	50
Persons exiting to PH	52	22	30
Percentage of exits to PH	72%	100%	60%
Active clients on last day	29	9	20
Active clients placed in PH	1		1
Households served	76	19	57
Households receiving TFA	29	4	25
Total TFA	\$23,501.14	\$6,081.00	\$17,420.14

Data Quality Report – HMIS Projects and CoCs

- Verify that data for all relevant HMIS projects are included in the upload and in the report and that the project types (in parentheses) are correct
- Check CoCs to make sure that they are valid and that all CoCs that should be represented are on the list
- If the report shows project excluded from the report, check to make sure that's what you expect – project types may need to be corrected in HMIS

HMIS projects included in report

SSVF Prevention (HP), SSVF Rapid Re-Housing (RRH)

CoCs represented in upload

XX-999, OH-500

HMIS projects excluded from report

Projects not identified as Homelessness Prevention or Rapid Re-Housing. Project types are in parentheses.

SSVF RRH Subgrantee(7)

100% Required Fields (New in March)

- Information in these fields is required to determine eligibility for SSVF and/or does not require input from clients
 - There is zero tolerance for missing data in these fields
 - Issues identified on the data quality report must be corrected in HMIS and data must be re-uploaded to the Repository.
-
- | | |
|---------------------------------------|----------------------------------|
| ○ Social Security Number for Veterans | ○ VAMC Station Code |
| ○ Relationship to Head of Household | ○ Client Location – CoC Code |
| – No Head of Household | ○ Income as a Percent of AMI |
| – Multiple Heads of Household | ○ Residential Move-In Date (RRH) |

Data Quality Report – Field Scores

- Any field marked with an X is below the threshold for satisfactory data quality
- **Veteran SSN** is on the DD214 and must be entered into HMIS

Upload Data Quality

Sample SSVF Program

Upload 2/1/2016 8:00:00 AM

99.1%

Field	Checked for	Records	Issues	Score	
Social Security Number	Veterans	76	1	98.7%	✗
Social Security Number	Non-veterans	25	0	100.0%	✓
Date of Birth	All	101	0	100.0%	✓
Gender	All	101	0	100.0%	✓

Data Quality Report - Record Identifiers

Repository Upload Issues - Record Identifiers

Sample SSVF Program

Upload 2/1/2016 8:00:00 AM

This section provides information to help identify which records are generating errors. In general, any record with a value of *Client doesn't know*, *Client refused*, or where the information was not collected is included in the error count for the relevant field. For fields with special error count criteria, a description is provided under the field name below.

Client records in an HMIS are identified using a Personal ID. Personal IDs (and Project Entry or Exit Dates) are provided below for records included in the error count on the first page of this report. If you do not know how to find a record in HMIS using the Personal ID, contact your HMIS Administrator.

All Clients

The total number of records is a count of the unique PersonalIDs (client records) where the client was enrolled in any HP or RRH project during the current grant year. The error count includes any client record that meets the criteria described below the field name below.

Social Security Number

Regardless of the reason, missing and invalid SSNs are always included in the error count for data quality purposes. An invalid SSN is one that does not conform to the rules established by the Social Security Administration. Veterans MUST provide a valid SSN. Veterans and non-Veterans are included in this list.

*5M65653

Data Quality Report – Field Review

- **CoC Code** - grantees must know where the Veteran is living at the time of project entry in order to verify eligibility
- **Income as a Percent of AMI** – required to verify eligibility
- **VAMC Station Code** – based on grantee service location / does not require any input from client
- **HP Screening Score** – required to verify eligibility for HP

Client Location - CoC Code	HoH at entry	76	1	98.7%	✗
Income as a Percent of AMI	HoH at entry	76	1	98.7%	✗
VAMC Station Code	HoH at entry	76	2	97.4%	✗
HP Screening Score	HP HoH at entry	19	1	94.7%	✗

Income Fields

- Income from Any Source and Total Monthly Income at project entry are relevant to eligibility
- Threshold at project exit is still 90% as it may not be possible to collect for all clients (e.g., client disappears) – although it is critical to make an effort to do so

Income from Any Source	Adults at entry	83	0	100.0%	✓
Total Monthly Income	Adults at entry	83	3	96.4%	✗

- Total monthly income amounts over \$4,000 are flagged for review but not scored

Very High Monthly Income (entry)

The error count includes records where the Total Monthly Income exceeds \$4,000, which may indicate a data entry error. This is not included in the data quality score as it is possible that the amount is valid, but grantees must verify and correct as appropriate for all records listed.

*5M45611 \$25611

Residential Move-In Date

- Entered for RRH HoH when household moves into permanent housing
- Critical in reporting on length of time to placement
- Errors are only flagged when a household exits to permanent housing and there is no Residential Move-In Date because this is the only comparison point we have

Head of Household - RRH Permanent Housing Exits

The total number of records is a count of client records + Project Exit Dates for RRH heads of household with a permanent housing exit destination. Error counts include records with no Residential Move-In Date and records where the Residential Move-In Date is not between the Entry Date and Exit Date. **NOTE:** Residential Move-In Date must be entered into HMIS *at the time of placement*. The DQ check only flags missing dates for PH exits because this is the only available comparison point; prior to exit, a missing date may accurately indicate that the household has not yet been placed.

Residential Move-In Date

*128409 12/31/2015, *209897 11/30/2015, *209901 11/30/2015, *267584 11/30/2015, *346942 12/31/2015, *374323 12/31/2015

Relationship to Head of Household

- There should be one and only one person identified as the head of household (HoH)
- As a general rule, designate the eligible Veteran as HoH
- In a household with more than one Veteran, follow CoC methodology to designate the HoH

Household Issues

The total number of records is a count of unique Household IDs for households served during the current grant

No Head of Household

The error count includes households for which there is no client in the household with a Relationship to Head of Household of Self (Head of Household). Every household must have one and only one identified head of household in order to be included in household counts. Listed below are Personal IDs for one member of each household; the ID was selected at random from the household members in order to identify the household.

*5M33433 04/02/2015

'Other' Issues

- 'Other' is almost always a bad choice when entering data
- It should only be used if selecting one of the (non-)other options would absolutely positively make no sense – this is very rare
- 'Other' is included in error counts for Residence Prior to Project Entry and Destination.

All Clients at Project Exit

The total number of records is a count of client records + Project Exit Dates for all clients.

Destination

In addition to the standard criteria, error counts include records where the value for this field is *No exit interview complete* or *Other*. To assist in identifying a more appropriate response when the value is *Other*, this list includes the content of the *If other, please specify* field in parentheses after the exit date.

*5M31983 10/06/2015, *5M34493 10/27/2015 (Client going to live with sister.), *5M5233 01/13/2016

Residence Prior to Project Entry – HP vs. RRH

- Clients served under Homelessness Prevention should not be homeless at project entry
- Clients served under Rapid Re-Housing MUST be homeless at project entry
- Check to make sure clients are enrolled under the correct project type
- These alerts are not part of the data quality score, but they must be reviewed and corrected where necessary

Alerts	Checked for	Issues
Homeless Living Situation	HP adults at entry	12
Non-Homeless Living Situation	RRH adults at entry	4

Duplication of Services (new)

- This portion of the report will only be included if you have veterans active in your program (with no exit date) who have also been served under other SSVF grants
- Information includes the HMIS Personal ID for your client, the entry date into your program, and your project type
- Information about the other enrollment includes grantee name, their HMIS Personal ID, Entry Date, Exit Date, and TFA total (if any)
- TFA data may be missing – don't assume that TFA was not provided

Duplication of Services

Sample SSVF Program

Clients active as of 1/31/2016 who have been served under other SSVF grants

Your Enrollment			Other Grant Enrollment					
Personal ID	Entry Date	Project Type	Other Grant	Other Personal ID	Entry Date	Exit Date	Project Type	TFA
46347	10/6/2014	RRH	Grantee A Name	AB4589	12/15/2015		HP	\$1,823.50
50740	12/14/2015	RRH	Grantee B Name	50740	9/30/2015	12/14/2015	RRH	\$3,990.00
9679	7/29/2015	RRH	Grantee C Name	COS123	5/19/2015	8/12/2015	RRH	
10261	10/19/2015	RRH	Grantee C Name	60153	9/15/2015	1/25/2016	RRH	
8659	8/12/2014	HP	Grantee A Name	62576	1/6/2016		RRH	

HMIS/Repository Monthly Upload Timeline

- Repository opens on the 1st *business* day
- Grantees must upload HMIS data no later than the 3rd *business* day
- Data quality reports emailed on the 4th *business* day
- The Repository will remain open for re-uploads through the 10th (not the 10th business day – the 10th day of the month)
- Data quality reports emailed on the 11th or the first business day after the 11th

Sample HMIS Repository Schedule – April 2016

2016 April						
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
28	29 3rd business day	30 4th business day	31	01 Repository opens 1st business day	02	03
04	05 First upload deadline	06 DQ reports sent	07	08	09 10 th day	10 Final day to upload
11 Repository closed - DQ reports sent	12 11th day	13	14	15	16	17



Quarterly Certification

- SSVF Program Office is no longer requiring submission of Quarterly Performance Reports (Programmatic and Financial).
- Replacement Reporting Requirement - Online Quarterly Certification of the following:
 - Grantee compliance with the SSVF Final Rule and approved grant agreement on a quarterly basis using the online Requirement process within the grants management system (GIFTS).
 - Grantee ongoing review of SSVF Data Quality Reports (from Repository)
 - Grantee payment requests from HHS Payment Management System reflect actual spending and expenditures are for costs approved on SSVF budget.
 - Trainings/Webinars

HMIS Duplicate Enrollments

- Occurs when a Veteran has been enrolled in multiple SSVF programs.
- Many reasons duplication may occur:
 - Veterans “shopping” for additional support/TFA
 - The combination of grant awards (migration of data)
 - Data entry error
 - Veteran is known to be enrolled in multiple programs (accurate data)
 - Other
- Grantees are expected to review their HMIS records and client files, investigate the duplication, and resolve the issue (*if needed*).
 - If a client has received TFA benefits, the grantee must determine if total amounts within each TFA category have exceeded the limitations stated in the NOFA/Final Rule.
- Notify SSVF Program Office (via quarterly certification).

Completing Online Quarterly Certification Form

- Submit through online SSVF grants management system (GIFTS)
 - Quarterly Certification Requirement form will be activated at the beginning of each quarter.
 - Online forms can be shared for review and/or transferred to another owner within grantee agency (be aware of your user accounts).
- Grantees Must Submit Online Requirement Form No Later Than 20th Calendar Day after Quarter.
 - Please note that failure to submit the certification will result in non-compliance.

Quarterly Certification Requirement

Overview of requirement form

[Contact Us](#) | [SSVF NOFA and Forms](#) | [Exit](#)

1 Page 1

2 Review My Requirement

Page 1

[Printer Friendly Version](#) | [E-mail Draft](#)

* Required before final submission

Grantee Information:

Organization Name

Reference Number

* Report Period

Q1 ▼

VETERANS HEALTH ADMINISTRATION

Quarterly Certification Requirement

Certification Point of Contact:

* Name (First & Last)

* Title:

* Email:

Final Rule:

* I certify that this SSVF program is in compliance with the Final Rule (38 CFR part 62).

* I certify that I am operating in compliance with my signed grant agreement.

Quarterly Certification Requirement

Data Quality:

- * I certify that I am reviewing the monthly data quality/upload summary reports and addressing any data elements with a score below 95%.

Yes ▼

- * I certify that full SSN information is entered for all Veterans served in our SSVF program.

Yes ▼

- * I certify that accurate CoC codes are entered for all clients served in our SSVF Program.

Note: CoC codes should be linked to the client/head of household

Yes ▼

- * I certify that accurate 3 or 5-digit VA Medical Center (VAMC) codes are entered for all clients served in our SSVF Program.

Please refer to station codes provided by the SSVF Program Office.

Yes ▼

- * I certify that Residential Move-In Dates are entered as soon as Rapid Re-Housing clients move in to a permanent residence.

Yes ▼

- * I certify that Housing Prevention Threshold Scores are entered for all prevention clients served in our SSVF Program.

Yes ▼

Quarterly Certification Requirement

- * I certify that accurate Destination information is entered at program entry and exit for all clients served in our SSVF Program. The use of "Other" as a destination option is used sparingly and only in instances where no other destination code is a viable option.

Yes ▼

- * I certify that our program is addressing all erroneous records indicated in our monthly Data Quality/Data Summary Reports.

Yes ▼

- * I certify that I have reviewed and resolved all enrollment duplication issues identified in the monthly Data Quality/Upload Summary report. Please refer to the section of the report listing records with duplicate enrollments in one or more SSVF program.

Yes ▼

- * I certify that all duplicate enrollments have been reviewed and our program has made all efforts to ensure that individual TFA payments have not exceeded the limitations in the Final Rule/NOFA.

Yes ▼

- * Were any incidents identified in which the Veteran and/or Landlord knowingly received duplicate TFA payments from multiple SSVF providers?

Yes ▼

Quarterly Certification Requirement

HHS Subaccount Drawdowns:

- * I certify that payment requests from HHS Payment Management System reflect actual spending.

Yes ▼

- * I certify that all expenditures are for costs approved on the SSVF Budget.

Yes ▼

- * I certify that I have received approval from the SSVF Program Office for any modifications made to my approved SSVF budget.

Yes ▼

- * I certify that all spending is in compliance with all OMB regulations.

Yes ▼

Quarterly Certification Requirement

Additional feedback for SSVF Compliance Office:

*** I certify that I am authorized to submit this response on behalf of this SSVF program.**

☐

Save & Finish Later

Review & Submit

Quarterly Certification Requirement

Timeline for Review

- The Program Office will review each submission.
- SSVF Regional Coordinators may request additional information from grantees, based on submission.
- Contact SSVF@va.gov for assistance.



Q & A