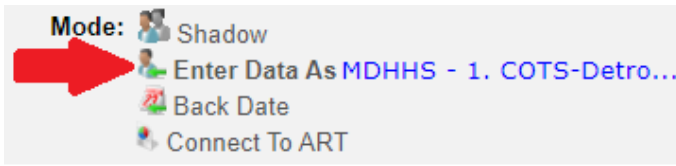
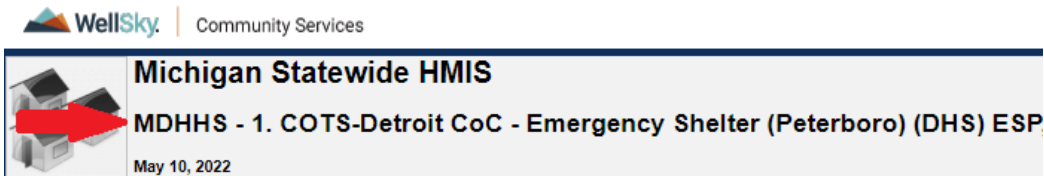


Running, Reviewing, and Printing the CoC APR

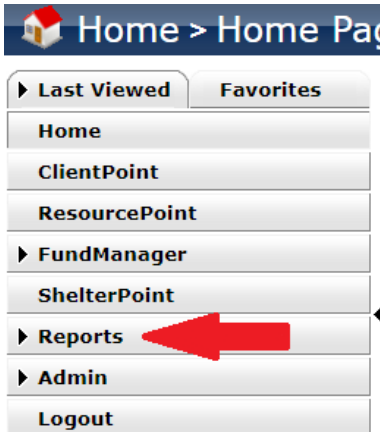
1. Enter Data As (EDA) into the project you are running the report for; in the top right corner of Community Services.



Note: Some staff may automatically default to this project and can skip this step after confirming the program listed in the upper right corner of Community Services (ServicePoint) login home screen



2. On the left-hand side of the screen, go to the "Reports" module



3. Under "Provider Reports" click the tile labeled "CoC APR"

Provider Reports



4. Complete the prompts for the project you are running the report for. Make sure the **provider** matches the page you may have EDA'd into in step 1 above. Once prompts are completed, select "build report". For **program date range**, enter the date range for the Quarterly Audit sent for review, e.g., Q1 1/1/2022-3/31/2022. Select your entry type dependent on your project:
 - a. **HUD** -ES, RRH, TH, PSH, Coordinated Entry, Prevention (some **youth** programs may also be using HUD)
 - b. **PATH** -PATH
 - c. **RHY** - Youth
 - d. **VA** - SSVF, HUDVASH, GPD, VBNL
 - e. **Basic** – CE Diversion/Prevention, CCSEM Services only

Note: To confirm that all clients in the project have the correct Entry/Exit Type, we recommend running a report with all Entry Exit Types selected except one specified to your project. If values are found in the report, these are all errors that should be corrected by changing the entry type to that specified to your project
5. Once prompts are completed, select build report.

Report Options

Name	CY COTS Shelter 261	NOTE: Naming and adding a Description for your report is optional but may prove useful should you run multiple reports at a time.
Description		
Provider Type	<input checked="" type="radio"/> Provider <input type="radio"/> Reporting_Group	
Provider *	MDHHS - 1. COTS-Detroit CoC - Emergency Shelter (Peterboro) (DHS) ESP, City ESG-CV (261) <input type="radio"/> This provider AND its subordinates <input checked="" type="radio"/> This provider ONLY	
Program Date Range *	01 / 01 / 2021 to 12 / 31 / 2021	
Entry/Exit Types *	<input type="checkbox"/> Basic <input type="checkbox"/> Basic Center Program Entry/Exit <input checked="" type="checkbox"/> HUD <input type="checkbox"/> PATH <input type="checkbox"/> Quick Call <input type="checkbox"/> RHY <input type="checkbox"/> Standard <input type="checkbox"/> Transitional Living Program Entry/Exit <input type="checkbox"/> VA <input type="checkbox"/> HPRP (Retired)	
Build Report	Download	Clear

6. Once the report appears, click the blue hyperlinked value next to row **5a1 "Total Number of Persons Served"**. Review the list that displays to ensure this matches up with the clients who were served by your project in the reporting period recorded in step 4.

5a - Report Validations Table	
Report Validations Table	
1. Total Number of Persons Served	510

- a. If a **client's name is missing** from the list in 5a1, make sure that they are entry in the project on or before between the start date in put in step 4. Re-run your APR afterward to make sure that they appear in line **5a1 "Total Number of Persons Served"**.
- b. If a client's name appears in 5a1 **who was not served** during the reporting period from step 4, make sure that they have been exited from HMIS.

- c. Make sure section **5a4 “Number of Persons with Unknown Age” = 0**. Clicking the value will show a list of clients who need to have a date of birth recorded in the entry that overlaps the report dates entered in step 4. Once the correction is made, re-run your APR to make sure the value shows a 0.

5a - Report Validations Table	
Report Validations Table	
1. Total Number of Persons Served	510
2. Number of Adults (age 18 or over)	193
3. Number of Children (under age 18)	317
4. Number of Persons with Unknown Age	0

- d. Make sure section **5a15 “Number of Child and Unknown Age Heads of Household” = 0**. Clicking the value will show a list of clients who need to have either their date of birth reviewed or have their entry connected to their adult parent. This entry should fall between the reporting dates entered in step 4. Once the corrections are made, re-run your APR to make sure the value shows a 0.

15. Number of Child and Unknown-Age Heads of Household	0
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7. Make sure section **6a “Data Quality: Personally Identifiable Information”** shows a **0% error rate** for Date of Birth, Race, Ethnicity, and Gender. Clicking the blue values below “Client Doesn’t Know/ Client Refused”, “Information Missing”, and “Data Issues” will show you the clients who need to have this information completed in their project entry that fits within the reporting period outlined in step 4.

6a - Data Quality: Personally Identifiable Information				
Data Element	Client Doesn't Know/Client Refused	Information Missing	Data Issues	% of Error Rate
Name (3.1)	0	0	0	0%
SSN (3.2)	0	1	60	31%
Date of Birth (3.3)	0	1	0	1%
Race (3.4)	0	1		1%
Ethnicity (3.5)	0	1		1%
Gender (3.6)	0	1		1%
Overall Score				32%

8. Make sure section **6b “Data Quality: Universal Data Elements”** shows a **0% error rate** for Veteran Status, Relationship to Head of Household, Client Location, and Disabling Condition. Clicking the blue values below “Error Count” will show you the clients who need to have this information completed in their project entry that overlaps the reporting dates entered in step 4.


6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	0	0%
Project Start Date (3.10)	0	0%
Relationship to Head of Household (3.15)	2	1%
Client Location (3.16)	0	0%
Disabling Condition (3.8)	2	1%


- a. Adjustments to Veteran Status must be made on the client's profile page by clicking the pencil next to the client record:

Client Information | Service Transactions

Summary | **Client Profile** | Households | ROI | Entry / Exit

 **Client Record**


Name
Name Data Quality
Alias
Social Security
SSN Data Quality
U.S. Military Veteran?
Age

 **Client Demographics**


Client Date of Birth
Date of Birth Type
Gender of Client
Primary Race
Secondary Race (if applicable)
Ethnicity

Household Data Share

Client Record ✕

 Editing the Client Record Information could affect the Unique ID and the Client Search.

Client Record

Name	First	Middle	Last	Suffix
	Ray		French	
Name Data Quality	Full Name Reported			
Alias	RAY RAY			
Social Security	...	- ..	1551	
SSN Data Quality	Full SSN Reported (HUD)			
U.S. Military Veteran?	Yes (HUD) 			

Save Cancel

- b. Adjustments to **Relationship to Head of Household** must be made in the client's entry that overlaps the reporting dates entered in step 4. Note – for projects serving families, errors will also flag here if more than one household member has a response of "Self" recorded as only one person can be marked the Head of Household in Community Services

BASIC DEMOGRAPHIC INFORMATION

Relationship to Head of Household	Self (head of household) ▼ G
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- c. Adjustments to **Client Location** must be made in the client's entry that overlaps the reporting dates entered in step 4. It is important to make sure that the response recorded ALWAYS reads **MI-501**.

(Question below: Answer for HoH only)

Client Location	MI-501 (Detroit) ▼ G
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- d. Adjustments to **Disabling Condition** must be made in the client's entry that overlaps the reporting dates entered in step 4. It is important that both the gateway question "Does the client have a disabling condition" and the responses recorded in the disabilities sub-assessment agree. Also, ensure **HUD verification** has a green checkmark, and all disability types has been answered within the sub-assessment.

HEALTH AND DISABILITY INFORMATION

Answer for All Clients Including Children

Does the client have a disabling condition?

Disabilities HUD Verification

Disability Type	Disability determination	Start Date*	End Date
Alcohol Use Disorder (HUD)	No (HUD)	05/10/2022	
Physical (HUD)	Yes (HUD)	05/12/2021	
Chronic Health Condition (HUD)	Yes (HUD)	06/26/2020	
Physical (HUD)	No (HUD)	04/20/2015	

Add Showing 1-5 of 12

Disabilities HUD Verification

HUD Verification: Disabilities for 05/10/2022

Per Disability Type, the current records for Disabilities as of 05/10/2022 are displayed below. Any previous records for Disabilities not overlapping as of this date are not displayed. In the event that multiple records exist per Disability Type as of 05/10/2022, records containing "Yes" values will be displayed and take precedence for reporting purposes.

Select the Disability determination value for all incomplete Disability Type records

- No (HUD)
- Client doesn't know (HUD)
- Client refused (HUD)
- Data not collected (HUD)
- Incomplete

Disability Type	Disability determination					
	Yes (HUD)	No (HUD)	Client doesn't know (HUD)	Client refused (HUD)	Data not collected (HUD)	Incomplete
Alcohol Use Disorder (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Both Alcohol and Drug Use Disorder (HUD)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic Health Condition (HUD)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developmental (HUD)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug Use Disorder (HUD)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV/AIDS (HUD)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Disorder (HUD)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical (HUD)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- e. For any disabling condition that a client reports a “yes” response, be sure to click the pencil to record a response to “If yes, expected to be of long- continued and indefinite duration and substantially impairs ability to live independently.

Add Recordset ✕

Disabilities

Disability Type	Alcohol Use Disorder (HUD)
Disability determination	Yes (HUD)
If Yes, Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	Yes (HUD) G
Above condition is going to be long term? (Retired)	Yes G
Note on Disability	<div style="border: 1px solid gray; height: 40px; width: 100%;"></div> G
Start Date *	05 / 10 / 2022 23 23 23 G
End Date	/ / 23 23 23 G

Save
Cancel

- 9. Make sure that section **6c “Data Quality: Income and Housing Data Quality”** shows a 0% error rate for income and sources at start, income and sources at annual assessment, and income and sources at exit. Clicking the blue values below **“Error Count”** will show you the clients who need to have this information completed in their project entry that overlaps the reporting dates entered in step 4.

Note: clients who appear in each section, fixing the preceding error often clears them from subsequent sections.

- a. Errors are typically flagged by a mismatch between the responses recorded for **“Income from Any Source”** and the details in the **“Monthly Income”** Sub-assessment under the *Income & Non-Cash benefits* section of flagged client’s assessments.
- b. Income and Sources (4.2) at Entry – refer to an issue in the client’s entry assessment. Income and Sources (4.2) at Annual Assessment – refers to an issue in the client’s interim review. If a client was in the program for 1 year (or more) during the reporting range and an annual assessment one was not recorded the error cannot be cleared until an interim review is recorded and saved. Annual assessments must be dated within +/- 30 days of the client’s anniversary of entry into your program. Interims recorded outside of this window are not counted in the APR. Missing annual assessments impact section 6c, as well as errors flagged in sections 16-21 further down in the report which reflect information on client income, non-cash benefits, and health insurance. Income and Sources (4.2) at Exit – refer to an issue in the client’s exit assessment.

- c. If you believe old income sources may be pulling over from a client's prior entries at another provider, clicking "view gross income" will allow to check to see if the assessment reflects more than the most recently recorded monthly income. Adding an end date just before the client's entry into to your into to your program should clean up the problem.

INCOME AND NON-CASH BENEFIT INFORMATION

Answer for Head of Household and Adults. List any children's income or benefits on the head of household's record.

Income from Any Source **G**

Monthly Income HUD Verification

	Monthly Amount	Source of Income	Receiving Income Source?	Start Date*	End Date
	US\$500.00	Unemployment Insurance (HUD)	Yes	12/10/2018	05/10/2022
	US\$1,000.00	SSI (HUD)	Yes	10/12/2018	05/10/2022
		Other (HUD)	No	11/07/2017	
		VA Non-Service Connected Disability Pension (HUD)	No	11/07/2017	
		Worker's Compensation (HUD)	No	11/07/2017	

Add Showing 1-5 of 107

View Gross Income

Totals

Gross Monthly Income:	US\$4,323.00
Gross Annual Income:	US\$51,876.00

Monthly Income

Monthly Amount **G**

Source of Income **G**

If Other, Please Specify

Receiving Income Source? **G**

Start Date* **G**

End Date **G**

- d. Missing annual assessments impact section 6c, as well as errors flagged in sections 16-21 further down in the report which reflect information on client income, non-cash benefits, and health insurance.

10. Review section 6d “Data Quality: Chronic Homelessness”. Clicking the blue values below “Approximate Date started”, “Number of times”, and “Number of months” will show you the clients who need to have this information completed.

6d - Data Quality: Chronic Homelessness							
Entering into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate Date started (3.917.3) DK/R/missing	Number of times (3.917.4) DK/R/missing	Number of months (3.917.5) DK/R/missing	% of records unable to calculate
ES, SH, Street Outreach	42			11	11	12	29%

- a. These questions section align with responses recorded in the client’s entry that overlaps the reporting dates outlined in step 4. Their “homeless history interview” and will only appear if the client’s prior living situation was recorded as being in a place not meant for habitation, emergency shelter, or in safe haven:

Questions must be asked exactly as they are presented below.

Prior Living Situation (Immediately Prior to Entry) | Place not meant for habitation (HUD) G

Length of Stay in Previous Place | One month or more, but less than 90 days G

Approximate date homelessness started: | [] / [] / [] G

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 | Four or more times (HUD) G

Total number of months homeless on the street, in ES or SH in the past three years | 12 G

11. Make sure section 14b “Persons Fleeing Domestic Violence” shows 0 clients in the row for “Client Doesn’t Know/Client Refused” and “Data Not Collected”. Note: Only clients who reported “yes” to being a Domestic Violence survivor will appear in section 14b of the APR

14b - Persons Fleeing Domestic Violence					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	6	0	6	0	0
No	11	0	11	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	17	0	17	0	0

- a. If a value other than zero appears in these two rows, clicked the blue number to see which clients need to have a response recorded for “If Yes for Domestic Violence Victim/Survivor, are you currently fleeing?” in their project entry that overlaps the reporting dates out lined in step 4.

DOMESTIC VIOLENCE INFORMATION

Answer for Head of Household and Adults

Domestic violence victim/survivor	<input type="text" value="Yes (HUD)"/>	G
If yes for Domestic violence victim/survivor, when experience occurred	<input type="text" value="-Select-"/>	G
If yes for Domestic Violence Victim/Survivor, are you currently fleeing?	<input type="text" value="-Select-"/>	G

12. Once section 5a accurately reflects the clients your ES, SH, or TH project served within the reporting period entered in step 4, and all data errors are 0% for portions of sections 6a, 6b, 6d, and 14b noted in steps 6-11 above, you will typically export this data for upload to Sage if you are submitting this report to HUD.

13. If you wish to save a PDF copy of your APR, this can be done by:
- a. Right clicking inside of the report. Then selecting “print” → save as PDF → Save.
 - b. OR by printing a copy directly from your internet browser and then scanning it to save as a PDF.
- Note:** Please include the project in the file name.

