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California System Performance Metrics: Data Points Guide

California Interagency Council on Homelessness



California on Homelessness



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Introduction

The California Interagency Council on Homelessness (Cal ICH) developed California System Performance Metrics (CA SPMs) to track progress toward ending homelessness. These are based on, but broader than, HUD's System Performance Measures (SPMs). Data is drawn from all 44 California Continuums of Care (CoCs) via California's Homeless Data Integration System (HDIS), including both residential and non-residential project types.

The CA SPMs not only reflect performance outcomes but also drive funding decisions and statewide strategy, which increases the importance of high-quality, complete Homeless Management Information System (HMIS) data. High quality data is a shared responsibility across providers, CoCs and HMIS leads. Reliable data ensures that the progress made to end homelessness in California is accounted for.

Purpose

This guide is intended to support CoCs' understanding of the calculation logic of the CA SPMs. For each measure, it provides an overview of the relevant HMIS data elements, data quality considerations, and insights into how data points are translated into performance outcomes. The guide can aid decision making related to data governance and data quality oversight.

Related Materials and Resources

Contextual information about HDIS and the CA SPMs is publicly available and will not be reproduced here. References include:

- <u>California Homeless Data Integration System</u>
- <u>California System Performance Measures Guide</u>
- <u>Crosswalk of California and US Department of Housing and Urban Development</u>
 <u>System Performance Measures</u>

When reviewing the data elements referenced in this guide, CoCs may also find it useful to check their CoC Data Quality Dashboard to identify any data quality issues and errors related to those elements in their quarterly uploads to HDIS. For each HMIS CSV Source File, the "Detailed Errors" tab of the Data Quality Dashboard includes identifying information for records in which a given data element is null or has an invalid response. For every record with an invalid response, an error message explains the potential issue with the element. Please see the <u>CoC DQ Dashboard User Guide</u> for a complete list of error messages







Key CA SPMs Concepts Relevant to HMIS Data Quality Cross-CoC Data Set

The statewide scope of HDIS introduces the following unique dynamics of which CoCs should be aware when comparing their pre- and post-submission HMIS data against their CA SPMs:

- Complete Personal Identifying Information (PII) data (e.g., 3.01 Name; 3.03 Date of Birth) is critical for matching clients that have been served across multiple CoCs. It is also used to mitigate the impact of duplicate client records for the same person within a single CoC's data set.
- In some cases, one client may have demographic information recorded in one CoC that differs from the information recorded in another CoC. Data in HDIS undergoes an identity resolution process, which involves applying a set of rules that check and validate matches by cross-matching records, flagging errors, and combining duplicate entries. The end result is a single, standardized record for each client across all CoCs. Since client details may be sourced from different CoCs, clients' demographic information in a CoC's CA SPM Report may not match their demographic information recorded in that CoC's HMIS.
- CoCs do not have direct access to enrollment data from other CoCs. This limits CoCs' ability to reproduce CA SPMs outputs using HMIS data for measures that consider preceding or successive enrollments (e.g., identification of newly homeless or returns to homelessness).

Project Type Groups

The CA SPMs include enrollment data from all HMIS project types except Homelessness Prevention. Reporting rules within the CA SPMs frequently consider HMIS element 2.02.06 *Project Type*, broadly grouping projects into three categories:

- **Residential:** Entry/Exit Emergency Shelter (ES), Transitional Housing (TH), Safe Haven (SH), and all permanent housing project types.
- Night-by-Night (NbN): Night-by-Night Emergency Shelters (ES-NbN)
- Non-Residential: Street Outreach (SO), Coordinated Entry (CE), Supportive Services Only (SSO), and Other

Rules for Record Inclusion

Clients are entirely excluded from a CoC's CA SPMs if they had an enrollment in a permanent housing project within that CoC that indicated that they were housed for the entire reporting period (i.e., 3.12 Housing Move-In Date <= [reporting period start date] and 3.11 Exit Date > [reporting period end date] or null).









Enrollments are included if the period indicated by 3.10 Entry Date and 3.11 Exit Date overlap with the CA SPMs reporting period (after <u>quality controls</u> are applied) <u>AND</u> meet one of the following conditions:

- [Project Type Group] = Residential enrollment
- [Project Type Group] = Night-by-Night <u>AND</u> has at least one 4.14 Bed-Night Date record that indicates a homeless living situation within the reporting period.
- [Project Type Group] = Non-Residential <u>AND</u> has at least one 4.12 Current Living Situation or 3.917 Prior Living Situation record that indicates a homeless living situation within the reporting period.

Enrollment Record Quality Controls

Enrollment 3.10 Entry Date and/or 3.11 Exit Date values are subjected to a quality control process that mitigates potential over-estimation of homeless system engagement in project types where client interaction may be more transient or intermittent. These rules are described in the subsections below.

To minimize the degree to which enrollments are modified and inferences are made around time spent homeless and exit destination, CoCs should prioritize the following data entry practices:

- 1. 4.14 Bed-Night Dates should be entered whenever they occur, and 4.12 Current Living Situation records should be entered at every interaction with a client.
- 2. All 4.12 Current Living Situation records should indicate whether a client was experiencing homelessness at the time of contact. This includes the date on which the client exited the project, even if they exited to a non-homeless destination.
- 3. Exit NbN and Non-Residential enrollments when there has been no contact for 60+ days.
- 4. When there is a gap between records of contact for a given NbN or Non-Residential enrollment that exceeds 60 days, direct project staff to either enter missing records of contact or split the enrollment into two separate records.

Entry Date

3.10 Entry Date defines the beginning of an enrollment between a client and project. In HDIS, it may be modified to more accurately reflect a client's first date of enrollment where homelessness can be confirmed according to the following rules:

NbN Enrollments

• If 3.10 Entry Date does not already match the first recorded 4.14 Bed-Night Date for the enrollment, it will be reset to match that date.







• In the event an enrollment is split, the split-off enrollment record created will have 3.10 Entry Date set to 15 days before the earliest 4.14 Bed-Night Date after the reset 3.11 Exit Date.

Non-Residential Enrollments

In all of the following cases, only 4.12 *Current Living Situation* records that indicate a homeless living situation are considered.

- If 3.917.1 Prior Living Situation collected at enrollment start indicates homelessness, the original 3.10 Entry Date is retained.
- If the enrollment does not have a 3.917 Prior Living Situation, and 3.10 Entry Date is more than 15 days earlier than the first recorded 4.12 Current Living Situation for the enrollment, 3.10 Entry Date will be reset to 15 days before the first recorded 4.12 Current Living Situation. Otherwise, the original 3.10 Entry Date will be used.
- In the event an enrollment is split, the split-off enrollment record created will have 3.10 Entry Date set to 15 days before the earliest 4.12 Current Living Situation after the reset 3.11 Exit Date.

Exit Date

3.11 Exit Date defines the end of an enrollment between a client and project. In HDIS, it may be modified to more accurately reflect a client's last date of enrollment where homelessness can be confirmed according to the following rules:

NbN Enrollments

- <u>For exited enrollments</u>, if 3.11 Exit Date is not the day after the latest associated 4.14 Bed-Night Date, the report compares the [latest 4.14 Bed Night Date + 15 days] against the original 3.11 Exit Date and resets the 3.11 Exit Date to match the earlier date.
- <u>For unexited enrollments</u>, if the enrollment has a 4.14 Bed-Night Date recorded, 3.11 Exit Date is reset to [latest 4.14 Bed-Night Date + 15 days]. If the enrollment does not have a 4.14 Bed-Night Date recorded, 3.11 Exit Date is reset to 3.10 Entry Date + 15 days.
- Whenever there is a gap of 60+ days between two 4.14 Bed-Night Date records within the same enrollment, the enrollment is split and the original enrollment's 3.11 Exit Date is reset to 15 days after the latest 4.14 Bed Night Date that preceded the gap.

Non-Residential Enrollments

In all of the following cases, only 4.12 Current Living Situation records that indicate a homeless living situation are considered.

• <u>For exited enrollments</u>, if 3.11 Exit Date does not match the date of the latest associated 4.12 Current Living Situation record, the report compares the [date of







latest 4.12 Current Living Situation + 15 days] against the original 3.11 Exit Date and resets the 3.11 Exit Date to match the earlier date.

- <u>For unexited enrollments</u>, 3.11 Exit Date is reset to [date of the latest 4.12 Current Living Situation + 15 days].
- Whenever there is a gap of 61+ days between two 4.12 Current Living Situation records within the same enrollment, the enrollment is split and the original enrollment's 3.11 Exit Date is reset to 15 days after the date of the latest 4.12 Current Living Situation that preceded the gap.

Projects That Have Ceased Operation

If a project has a [Project Operating End Date], indicating it has ceased operation, any associated enrollments with no [Exit Date] or an [Exit Date] > [Project Operating End Date] will be reset to match the [Project Operating End Date] of the project.

Impact to Exit Destination

Whenever 3.11 Exit Date is reset according to any of the rules described in <u>Exit Date</u>, the 3.12 Destination value for the impacted enrollment is set to "Unknown."

HMIS Data Quality Considerations for Individual CA SPMs

Measure 1a and 1b: Number of Persons Experiencing Homelessness

Term	Description
Purpose	Count of persons active in homelessness response system during reporting period
Key Logic	 Measure 1a based on HMIS data Measure 1b based on unsheltered PIT count only Night-by-Night and Non-Residential enrollments require additional verification to be included in Measure 1a (see <u>Rules for Record Inclusion</u>).
Data Quality Considerations	 Accurate project start and project exit dates. Ensure consistent, complete, and accurate 4.12 Current Living Situation data entry for Non-Residential projects. Night-by-night shelter enrollments must include consistent bed night records.



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Measure 2: Number of Persons Accessing Services Who Are Experiencing Homelessness for the First Time

Term	Description
Purpose	Count of persons entering the homeless response system during the report period with no record of homelessness in the previous two years
Key Logic	 A person is newly homeless if they did not have any record of engagement with the homeless response system in the 2 years preceding their earliest date of engagement in the reporting period. Only persons with a 3.10 Entry Date on or after the first date of the reporting period may be counted as newly homeless. The enrollment that indicates that a client has previously engaged the homeless response system may have occurred in a different CoC than the CoC for which the CA SPMs are being generated.
Data Quality Considerations	 Complete and accurate PII required for accurate cross-CoC matching. Missing engagement data for Night-By-Night and Non-Residential project enrollments can cause 3.10 Entry Date to be reset, changing a client's categorization for the measure.

Measure 3: Number of People Exiting Homelessness into Permanent Housing

Term	Description
Purpose	Count people who exited the homeless response system to permanent housing and those who moved into PH projects during the report period
Key Logic	• If active in a permanent housing project as of the end of the reporting period, a 3.20 Housing Move-In Date record within the reporting period qualifies as a "permanent exit" for permanent housing enrollments that are still active as of the end of the reporting period.







	 If not active in a permanent housing project as of the end of the reporting period: A client must have an enrollment that meets all of the following criteria to be included:
Data Quality Considerations	 Timely enrollment exits will ensure all appropriate clients are included. Enrollments that overlap with a housing enrollment with a documented 3.20 Housing Move-In Date may indicate that the client needs to be exited from that housing enrollment. Missing 3.12 Destination data will cause an undercount of positive outcomes. Consistent and timely exit and engagement data entry is critical to avoid the loss of otherwise usable 3.12 Destination data due to enrollment record quality controls.

Measure 4: Length of Time Homeless

Term	Description
Purpose	Measure average time clients spent experiencing homelessness in a single CoC by looking at continuous episodes of system engagement that overlapped with the current reporting period
Key Logic	• Dates falling between the 3.20 Housing Move-In Date and 3.11 Exit Date (if exited) of a permanent housing enrollment will always cause a client to be counted as "housed" for









	 those dates, even if there are overlapping enrollments that suggest homelessness. Dates prior to the Report Start Date may be included if they are part of an episode of continuous system engagement that extended into the reporting period. The maximum length of time homeless is three years.
Data Quality	 For Night-By-Night and Non-Residential enrollments,
Considerations	engagement records (4.12 Current Living Situation or 4.13
	Bed-Night Date) that attest to homelessness impact which
	days are counted in this measure. See Enrollment Record
	Quality Controls for more information) may truncate Non-
	Residential and Night-By-Night enrollments.
	Overlapping enrollments will not result in overcounting of time
	homeless but may result in undercounting if one of the
	enrollments inaccurately indicates that the client is housed.

Term	Description
Purpose	Track the rate that persons re-engage the homeless response system within 6 months of exiting the system to a permanent destination.
Key Logic	 To be considered, client must have an enrollment that meets all of the following criteria: Exit must be within the first 6 months of the reporting period Exit must be followed by a gap of 14+ days (i.e., not covered or closely followed by any other enrollment) to be included in the measure Exit must be to a permanent destination. Please see

Measure 5: Percent of People Who Return to Homelessness









	• A client is only counted as a returner in the CoC in which they exited homelessness. They are not counted as a returner in the CoC in which they re-engage.
Data Quality	Missing 3.12 Destination data can distort return metrics. Consistent
Considerations	and timely exit and engagement data entry is critical to avoid
	the loss of otherwise usable 3.12 Destination data due to
	enrollment record quality controls.

Measure 6: Number of People with Successful Placements from Street **Outreach Projects**

Term	Description
Purpose	Count people who exited SO into positive destinations (i.e., no longer unsheltered).
Key Logic	 Exits are considered successful if they reflect a transition out of unsheltered homelessness. A client's latest exit is referenced for determining outcomes. In the case of a tie (i.e., two exits sharing the same date) with different outcomes, the exit that indicates success is prioritized. Please see <u>Appendix C: CA SPM 6 Destinations</u> for a complete list of destinations that indicate success for Measure 6. If selected exit's 3.12 Destination is any of the following, the client is excluded from measure: Deceased Hospital or other residential non-psychiatric medical facility Residential project or halfway house with no homeless criteria
Data Quality Considerations	 Missing 3.12 Destination data will cause an undercount of positive outcomes. Consistent and timely exit and engagement data entry is critical to avoid the loss of otherwise usable 3.12 Destination data due to <u>enrollment</u> record quality controls. If a client does not have a 4.12 Current Living Situation on the exit date, 3.12 Destination will be reset to unknown.









 If 4.12 Current Living Situation records that indicate homelessness are 60+ days apart, 3.12 Destination will be reset to unknown. Please see <u>Appendix D: Current Living Situations</u> <u>Indicating Homelessness</u> for a complete list of living situations that indicate homelessness.

Measure 7: Disaggregated Data

Term	Description
Purpose	Count of persons active in homelessness response system during reporting period.
Key Logic	 Relies on complete, client-reported demographic and assessment data, corresponding to the following HMIS elements: 3.03 Date of Birth (for age & household type calculations) 3.04 Race and Ethnicity 3.06 Gender 3.07 Veteran Status 4.11 Domestic Violence History 3.08 Disabling Condition
Data Quality Considerations	 Consistency in demographic fields is crucial for accurate equity analysis Proper inclusion of household members when enrollments are created and ended. Accurate disabling condition data, including the specific types (HMIS elements 4.05-4.10), not just the overarching 3.08 Disabling Condition element.







Appendix A: CA SPM 3 System Exit Destinations

System Exits from Any Project Type	
Value	Response
410	Rental by client, no ongoing housing subsidy
411	Owned by client, no ongoing housing subsidy
421	Owned by client, with ongoing housing subsidy
422	Staying or living with family, permanent tenure
423	Staying or living with friends, permanent tenure
426	Moved from one HOPWA funded project to HOPWA PH
435	Rental by client, with ongoing housing subsidy
	System Exits from Project Types 4, 6, 7, 11, or 14
Value	Response
101	Emergency shelter, including hotel or motel paid for with
101	emergency shelter voucher, or RHY-funded Host Home shelter
302	Transitional housing for homeless persons (including homeless
502	youth)
204	Psychiatric hospital or other psychiatric facility
205	Substance abuse treatment facility or detox center
312	Staying or living with family, temporary tenure (e.g. room,
512	apartment or house)
313	Staying or living with friends, temporary tenure (e.g. room,
515	apartment or house)
314	Hotel or motel paid for without emergency shelter voucher
215	Foster care home or foster care group home
118	Safe Haven
225	Long-term care facility or nursing home
327	Moved from one HOPWA funded project to HOPWA TH
332	Host home (noncrisis)







Appendix B: CA SPM 5 Destinations

Value	Response
410	Rental by client, no ongoing housing subsidy
411	Owned by client, no ongoing housing subsidy
421	Owned by client, with ongoing housing subsidy
422	Staying or living with family, permanent tenure
423	Staying or living with friends, permanent tenure
426	Moved from one HOPWA funded project to HOPWA PH
435	Rental by client, with ongoing housing subsidy

Appendix C: CA SPM 6 Destinations

Value	Response
101	Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter
118	Safe Haven
204	Psychiatric hospital or other psychiatric facility
205	Substance abuse treatment facility or detox center
215	Foster care home or foster care group home
225	Long-term care facility or nursing home
302	Transitional housing for homeless persons (including homeless youth)
312	Staying or living with family, temporary tenure (e.g. room, apartment or house)
313	Staying or living with friends, temporary tenure (e.g. room, apartment or house)
314	Hotel or motel paid for without emergency shelter voucher
327	Moved from one HOPWA funded project to HOPWA TH
332	Host home (noncrisis)
410	Rental by client, no ongoing housing subsidy
411	Owned by client, no ongoing housing subsidy
421	Owned by client, with ongoing housing subsidy
422	Staying or living with family, permanent tenure
423	Staying or living with friends, permanent tenure
426	Moved from one HOPWA funded project to HOPWA PH
435	Rental by client, with ongoing housing subsidy









Appendix D: Current Living Situations Indicating Homelessness

Value	Response
101	Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter
116	Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)
118	Safe Haven
204	Psychiatric hospital or other psychiatric facility
205	Substance abuse treatment facility or detox center
215	Foster care home or foster care group home
225	Long-term care facility or nursing home
302	Transitional housing for homeless persons (including homeless youth)
314	Hotel or motel paid for without emergency shelter voucher
332	Host home (noncrisis)
336	Staying or living in a friend's room, apartment, or house
335	Staying or living in a family member's room, apartment, or house
206	Hospital or other residential non-psychiatric medical facility
207	Jail, prison, or juvenile detention facility
329	Residential project or halfway house with no homeless criteria





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