31 Errors/Warnings Found in Your RDR

View Warning Comments | Print Validation Report | Close window

Error# Question

Error Message

Section 1

Validation Help

	The state of the s		
1.	Q#9, Q#11 (Error)	Q#9 9-10. Part A Dollars, Q#11 11b. Part A Minority AIDS Initiative Dollars. Agencies indicating that they have received Minority AIDS Initiative funding in Item 9 and reporting an amount in Item 11b. Part A Minority AIDS Initiative Dollars, must show an association with a Part A program in Item 10. If you believe an association should exist between your agency and a Part A program, please contact your Part A grantee for assistance.	
2.	Q#9, Q#12 (Error)	Q#9 9-10. Part B Dollars, Q#12 12b. Part B Minority AIDS Initiative Dollars. Agencies indicating that they have received Minority AIDS Initiative funding in Item 9 and reporting an amount in Item 12b. Part B Minority AIDS Initiative Dollars, must show an association with a Part B program in Item 10. If you believe an association should exist between your agency and a Part B program, please contact your Part B grantee for assistance.	
3.	Q#9, Q#13 (Error)	Q#9 9-10. Part C Dollars, Q#13 13b. Part C Minority AIDS Initiative Dollars. Agencies indicating that they have received Minority AIDS Initiative funding in Item 9 and reporting an amount in Item 13b. Part C Minority AIDS Initiative Dollars, must show an association with a Part C program in Item 10. If you believe an association should exist between your agency and a Part C program, please contact your Part C grantee for assistance.	
4.	Q#9, Q#11 (Error)	Q#9 Receive MAI Funds, Q#11 11b-14b. MAI Fund Amount. Having indicated Minority AIDS Initiative funding in Item 9, at least one funding amount greater than zero must be reported in part b of Items 11-14. But Minority AIDS Initiative funding should not be reported in part b of Items 11-14 if "No" or "Don't Know" is checked in Item 9.	
5.	Q#9, Q#14 (Error)	Q#9 9-10. Part D (including the Adolescent Initiative) Dollars, Q#14 14b. Part D (including the Adolescent Initiative) Minority AIDS Initiative Dollars. Part D Minority AIDS Initiative Dollars. Agencies indicating that they have received Minority AIDS Initiative funding in Item 9 and reporting an amount in Item 14b. Part D Minority AIDS Initiative Dollars, must show an association with a Part A program in Item 10. If you believe an association should exist between your agency and a Part A program, please contact your Part A grantee for assistance.	

Section 2

Validation Help

1.	Q#28, Q#23 (Error)	Q#28 Total Clients by Household Income must be equal to Q#23 Total Unduplicated Clients
2.	Q#28, Q#23 (Error)	Q#28 Total Clients by Household Income (HIV Affected) must be equal to Q#23 Total Unduplicated Clients (HIV Affected)
3.	Q#24, Q#67 (Error)	Q#24 Total New HIV-Indeterminate Clients, Q#67 Part D (including the Adolescent Initiative) New HIV-Indeterminate Clients. The number of new clients reported as HIV-indeterminate in Item 67 must not exceed the number of HIV-indeterminate clients in Item 24.

Section 3

Validation Help

1.	Q#33 (Error)	Q#33 Service Information (q. Food bank/home-delivered meals). If Column 2 is not checked, no data should be reported in Column 3a and Column 3b should not be checked. If Column 3a contains data or column 3b is checked, Column 2 must be checked. Please review and correct your entries for this service.
2.	Q#64, Q#33 (Error)	Q#64 Service Information (c. Oral health care), Q#33 Service Information (c. Oral health care). You reported clients served in Question 33c, Column 2, Oral health care. Because you reported clients served in Question 33c, you must also report that you provided Oral health care within the EIS program for the corresponding item in Question 64. Please check "Yes, within the EIS Program" in Question 64, row k, "Oral health care".

Section 4

Validation Help

Section 5

Validation Help

1	Q#42, Q#43 (Error)	Q#42 Clients with visits for outpatient/ambulatory medical care by Gender, Q#43 Clients with visits for outpatient/ambulatory medical care. The sum of all categories in Item 43, Outpatient/ambulatory medical care visits, must equal the total number of unduplicated clients reported by gender in Item 42.
2	Q#47, Q#47 (Error)	Q#47 47d. Number of clients received active TB disease Treatment, Q#47 47e. Number of clients completed active TB disease Treatment. The completion status of clients who received treatment for active TB disease is required. Enter the number of clients who received treatment for Active TB disease in Item 47d and enter the number of clients who completed treatment in Item 47e, "Completed treatment of active TB disease." If no clients began treatment for LTBI, enter zero in Item 47d, "Treatment of LTBI" and leave Item 47e, "Completed treatment of LTBI" blank.
3	Q#53, Q#53 (Error)	Q#53 53a. Number of HIV+ Pregnant Women, Q#53 53b. Number of Pregnant women by Trimester. Agencies reporting women clients who were HIV-positive and pregnant during the reporting period must report the number that entered care by Trimester. If your agency reported women who were HIV-positive and pregnant during the reporting period in Item 53a, you must report the number that entered care under each category in Item 53b (even if it is zero). If your agency did not report any clients in Item 53a, leave Item 53b blank.

Section 6

Validation Help

alluatioi	ттыр	
1.	Q#55, Q#56 (Error)	Q#55 55a. Total Clients by HIV Status must be equal to Q#56 Total Clients by Gender
2.	Q#56, Q#59 (Error)	Q#56 the number of Male clients reported in Item 56 must be equal to Q#59 The total number of Hispanic and Non-Hispanic Male clients in Item 59a and 59b
3.	Q#56, Q#60 (Error)	Q#56 the number of Male clients reported in Item 56 must be equal to Q#60 The total number of Hispanic and Non-Hispanic Male clients in Item 60a and 60b
4.	Q#56, Q#61 (Error)	Q#56 the number of Male clients reported in Item 56 must be equal to Q#61 The total number of Male clients in Item 61
5.	Q#24, Q#67 (Error)	Q#24 Part D (including the Adolescent Initiative) New HIV-Indeterminate Clients, Q#67 Part D (including the Adolescent Initiative) New HIV-Indeterminate Clients. The number of new clients reported as HIV-indeterminate in Item 67 must not exceed the number of HIV-indeterminate clients in Item 24.
6.	Q#66, Q#72 (Error)	Q#66 The total number of unduplicated clients reported in Item 66 must be equal to Q#72 The total number of Hispanic and Non-Hispanic clients reported in Item 72a and 72b by Race/HIV status/Age
7.	Q#69, Q#72 (Error)	Q#69 The number of HIV+/indeterminate clients whose age was 25-44 years in Item 69 must be equal to Q#72 The total number of Hispanic and Non-Hispanic HIV+/indeterminate clients whose age was 25-44 years in Item 72a and 72b
8.	Q#69, Q#72 (Error)	Q#69 The number of HIV+/indeterminate clients whose age was 45-64 years in Item 69 must be equal to Q#72 The total number of Hispanic and Non-Hispanic HIV+/indeterminate clients whose age was 45-64 years in Item 72a and 72b
9.	Q#69, Q#72 (Error)	Q#69 The number of HIV+/indeterminate clients whose age was 65 years or older in Item 69 must be equal to Q#72 The total number of Hispanic and Non-Hispanic HIV+/indeterminate clients whose age was 65 years or older in Item 72a and 72b
10.	Q#69, Q#72 (Error)	Q#69 The number of HIV-affected clients whose age was 25-44 years in Item 69 must be equal to Q#72 The total number of Hispanic and Non-Hispanic HIV-/unknown clients whose age was 25-44 years reported in Item 72a and 72b
11.	Q#72, Q#71 (Error)	Q#72 The total number of HIV+/ indeterminate Hispanic and Non-Hispanic clients who are 25-44 years in Item 72a and 72b must be equal to Q#71 The total number of HIV+/ indeterminate clients who are 25-44 years in Item 71
12.	Q#72, Q#71 (Error)	Q#72 The total number of HIV+/ indeterminate Hispanic and Non-Hispanic clients who are 45-64 years in Item 72a and 72b must be equal to Q#71 The total number of HIV+/ indeterminate clients who are 45-64 years in Item 71
13.	Q#72, Q#71	Q#72 The total number of HIV+/ indeterminate Hispanic and Non-Hispanic clients who are 65 years or older in Item 72a and 72b must be equal to Q#71 The total number of

	(Error)	HIV+/ indeterminate clients who are 65 years or older in Item 71
14.	Q#72, Q#71 (Error)	Q#72 The total number of HIV-/ unknown Hispanic and Non-Hispanic clients who are 25-44 years in Item 72a and 72b must be equal to Q#71 The total number of HIV-/ unknown clients who are 25-44 years in Item 71
15.	Q#64, Q#33 (Error)	Q#64 EIS Program (k. Oral health care), Q#33 Service Information (c. Oral health care). You reported clients served in Question 33c, Column 2, Oral health care. Because you reported clients served in Question 33c, you must also report that you provided Oral health care within the EIS program for the corresponding item in Question 64. Please check "Yes, within the EIS Program" in Question 64, row k, "Oral health care".
16.	Q#70b, Q#72b (Error)	Q#70b The number of Non-Hispanic HIV+/indeterminate clients reported as American Indian or Alaska Native in Item 70b must be equal to Q#72b The total number of Non-Hispanic HIV+/indeterminate clients reported as American Indian or Alaska Native in Item 72b
17.	Q#70b, Q#72b (Error)	Q#70b The number of Non-Hispanic HIV+/indeterminate clients reported as Black or African American in Item 70b must be equal to Q#72b The total number of Non-Hispanic HIV+/indeterminate clients reported as Black or African American in Item 72b
18.	Q#70b, Q#72b (Error)	Q#70b The number of Non-Hispanic HIV+/indeterminate clients reported as White in Item 70b must be equal to Q#72b The total number of Non-Hispanic HIV+/indeterminate clients reported as White in Item 72b
19.	Q#70b, Q#72b (Error)	Q#70b The number of Non-Hispanic HIV+/indeterminate clients reported as More than one race in Item 70b must be equal to Q#72b The total number of Non-Hispanic HIV+/indeterminate clients reported as More than one race in Item 72b
20.	Q#70b, Q#72b (Error)	Q#70b The number of Non-Hispanic HIV-affected clients reported as Black or African American in Item 70b must be equal to Q#72b The total number of Non-Hispanic HIV-/unknown clients reported as Black or African American in Item 72b

Section 7Validation Help

Copyright © HRSA. All Rights Reserved.