

# Homeless Management Data Collection Guide

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*This guide has been developed for the Homeless Resource Council of the Sierras (HRCS) to provide explanatory notes and data quality elements for HMIS data collection fields. It is intended to accompany data collection forms in order to facilitate complete, accurate, and uniform data collection throughout our Continuum of Care.*

**Please provide the Project Name and the complete name of the person completing the form. Answer all questions as completely and accurately as possible.**

## 3.10 Project Entry Date (i.e. Project Start Date)

First day the project provided services and/or housing.

- **RRH; PH** – Date client is admitted into the project (meets eligibility requirements)
- **SH; TH** – Date client moves into the residential project
- **ES** – Night the client first stayed in shelter for consecutive shelter period
- **SO; PATH** – Date of first contact with the client

## 3.1 Client's Name

Use the client's complete, full, legal name whenever possible

- Provide descriptive information if client's name is unknown
- Update to improve accuracy and completeness over time

### DATA QUALITY:

- **Full Name** – Client's full name is known and provided
- **Partial, Street Name, or Code Name Reported**
  - 1) Partial, short, or nickname used instead of full first name;
  - 2) Street name or code name used for street outreach until client is able to provide complete legal name
  - 3) A name or modification was used for security reasons
  - 4) Any other reason the client's name does not match the client's full name as it would appear on ID
- **Client doesn't know** – Client does not know or is unable to provide their name
  - Use 'Client doesn't know' rather than 'Partial, street name, or code name reported' if a false name/made up name is used in order to create a client record
- **Client refused**

## 3.2 Social Security Number

Provide complete, accurate information or leave blank (last 4 digits okay)

- Select 'Client doesn't know' for those without a SSN
- Input all zeros for 'client doesn't know;' and all 9s for 'client refused'

### DATA QUALITY:

- **Full SSN** – a full and complete SSN is provided
- **Partial SSN** – any SSN other than a complete and valid 9 digit SSN, regardless of the reason
- **Client doesn't know** – Client does not know or does not have a SSN
- **Client refused** – Client refuses any part of their SSN, regardless of the reason

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## 3.3 Date of Birth

Record month, day, and year for every person served

- Estimate DOB for client who doesn't know
  - ask age/approximate age and estimate year of birth
  - Indicate 01/01 for M/D

### DATA QUALITY:

- **Full DOB** – complete DOB provided by the client
- **Approximate or partial DOB** – for estimated DOB (see above)
- **Client doesn't know** – if unable to estimate within one year of actual age
- **Client refused** – only if client refuses any part of their DOB

## 3.4 Race

Record self-identified race for each client served

- NEVER use observations or assumptions to indicate race
- Client can identify with as many races as apply
- Indicate "P" for Primary identification and "S" for Secondary identification
- If not secondary race indicated, enter primary race again as secondary
- Ask follow-up questions to help client answer (responses tied to where ancestors came from)
- Ask the question for each household member – regardless of name and/or appearance

### DATA ELEMENTS:

- **American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.
- **Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- **Black or African American** – A person having origins in any of the black racial groups of Africa. Terms such as 'Haitian' can be used in addition to 'Black or African American.'
- **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White** – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- **Mark 'Client doesn't know' or 'Client refused' only if client cannot or does not identify** with any of the five listed responses. DO NOT make assumptions.

## 3.5 Ethnicity

Record self-identified ethnicity for each client served

- No documentation is necessary
- Do not use observations or make assumptions

### DATA ELEMENTS:

- **Non-Hispanic/Non-Latino**
- **Hispanic/Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture of origin, regardless of race
- **'Client doesn't know' or 'Client refused'** only if client does not or cannot respond

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## 3.6 Gender

Record self-reported gender for each client served

- Provide ALL options to every client – “Which of these genders best describes how you identify?”
- **DO NOT** use observations, make assumptions, or select a response if the client indicates “doesn’t know”
- Clients **MUST NOT** be asked about their medical history
- “Clients reporting different gender identities or presenting different gender expressions at multiple projects... are not violating standards for accurate collection of information” (p. 40).
- **If client discloses being transgender, staff should consult that client about whether they prefer the HMIS to reflect transgender status or not – if not, indicate the gender they choose.**

### DATA ELEMENTS:

- **Female; Male**
- **Trans Female (Male to Female)** – Clients who live or identify as women, even though they were assigned male at birth
- **Trans Male (Female to Male)** – Clients who live or identify as men, even though they were assigned female at birth
- **‘Client doesn’t know’ or ‘Client refused’** only if client cannot or will not disclose an option. **DO NOT** make assumptions or select a response in lieu of client’s self-reported gender.

## 3.8 Disabling Condition – \*Project Stay Element\*

Documentation is not necessary

- **Client report is best, but observation is allowable if client says “no” and disability is obviously present**
- **Consider some income sources as an indication of a disabling condition (i.e. SSI, SSDI, VA Disability Compensation)**

### DATA ELEMENTS:

- **No** – Does not disclose or appear to have a disability
- **Yes**
  - A physical, mental, or emotional impairment – including impairment caused by drugs/alcohol abuse, PTSD, or brain injury that:
    - 1) Is expected to be long-continuing or of indefinite duration’
    - 2) Substantially impedes the individual’s ability to live independently; and
    - 3) Could be improved by the provision of more suitable housing conditions.
  - A developmental disability
  - HIV/AIDS
  - A veteran who is disabled by an injury or illness that was incurred or aggravated during active military service
- **‘Client doesn’t know’ or ‘Client refused’ only if client cannot or will not disclose an option**

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## 3.7 Veteran Status

Ask only clients who are 18 years of age or older

- Status is not dependent on discharge status
- Ask additional questions for clients who may not be aware of their veteran status
  - “Have you ever been on active duty in the military?”
  - “Were you disabled during a period of active duty training?”

### DATA ELEMENTS:

- **No** – Veteran Status should be ‘No’ for anyone who has not been on active duty, including:
  - 1) Individuals who attended training but were discharged before reporting to a duty station;
  - 2) Reservists or National Guard who were never activated or deployed
- **Yes** – Anyone who has ever been on active duty in the armed forces of the United States, regardless of discharge status or length of service.
  - 1) Army, Navy, Air Force, Marine Corps, and Coast Guard: active duty begins when a military member reports to a duty station after completion of training;
  - 2) Reserves and National Guard: active duty is any time spent activated or deployed, either in the United States or abroad;
  - 3) OR Anyone who was disabled in the line of duty during a period of active duty training;
  - 4) OR Anyone who was disabled from an injury incurred in the line of duty or from acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident during a period of inactive duty training.
- **‘Client doesn’t know’ or ‘Client refused’** only if client cannot or will not disclose an option

## 3.15 Relationship to Head of Household – Household Composition

A household is a single individual or group of persons who apply together to a project for assistance and who live together in one dwelling unit; or, of those not housed, who would live together in one dwelling unit if housed.

- There can only be one HOH for any given project start
- **Youths presenting together should be entered as their own record**

### DATA ELEMENTS:

- **Self (HOH)** – Heads of household may be alternatively thought of as the “primary client,” the “eligible individual,” etc., rather than as a fixed designation
- **HOH’s child** – sons and daughters, including step-, adopted, and foster children of the HOH, regardless of their age
- **HOH’s Spouse or Partner**
- **HOH’s other relation member** – other relation to HOH
- **Other: non-relation member** – Groups of people may self-define their households or families, which may include other non-relations; However, **if the group of persons are all children and youth** (where none of the youth presenting are the child of another youth being served by a project), **each youth should be entered as their own record in their own household.**

## 3.16 Client Location

- Describe specific location (city, business, cross streets, landmarks, etc.)

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## 3.917 Living Situation – \*Project Stay Element\*

Information collected is used with other information to identify whether a client appears to meet chronic homelessness criteria. Documentation is not required.

- Data entry should reflect the actual prior living situation
  - Ask clients about their homeless history – on the street, in ES, SH project, etc.
  - Responses should reflect the client’s last living situation immediately prior to project start date
  - For projects that do not provide lodging, the ‘prior’ living situation may be same as client’s current living situation
1. ‘Type of Residence’ that most closely matches where the client stayed last night. Adult members of the same household may have different prior living situations.  
**SELECT ONE** (Explain options in each field) – **See “Data Elements for Type of Residence” on page 6.**
    - a. Literally homeless
    - b. Institutional situation
    - c. Transitional and permanent housing situation
  2. Record the length of time the client was residing in their previous place of stay – **See “Data Elements for Length of Stay in Prior Living Situation” on page 7.**
    - a. If the client is entering Transitional Housing **from an institutional setting:**
      - i. If client was in the institution for less than 90 days, indicate if their living situation immediately prior to entering the institution was on the streets, in an emergency shelter or a safe haven.
      - ii. If ‘Yes’ to both, proceed to step 3. If ‘No’ to either, stop collecting data for this element.
    - b. If the client is entering Transitional Housing **from any type of transitional or permanent housing:**
      - i. Indicate if the client was in the transitional or permanent housing situation for less than 7 nights; and if so, indicate if their living situation immediately prior to entering the transitional or permanent housing was on the streets, in an emergency shelter, or safe haven.
      - ii. If ‘Yes’ to both, proceed to step 3. If ‘No’ to either, stop
    - c. If the client is entering Emergency Shelter, Safe Haven, or Street Outreach, proceed to step 3.
  3. Record the actual or approximate date this homeless situation began (i.e. the beginning of the continuous period of homelessness on the streets, in emergency shelters, in safe havens, or moving back and forth between those places).
  4. Record the number of times the client has been on the streets, in emergency shelters, in safe havens, or moving back and forth between those places.
  5. Record the cumulative total number of months the client has been homeless on the streets, in emergency shelters, or in safe havens in the past three years.

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## DATA ELEMENTS for Type of Residence:

### Literally Homeless

- **Place not meant for habitation**
- **Emergency shelter, including hotel or motel paid for with emergency shelter**
- **Safe Haven**
- **Interim Housing** – Limited to use by PSH projects for which chronic homelessness is an eligibility criterion.
  - A housing situation where a chronically homeless person has: 1) applied for permanent housing, 2) been accepted, and 3) a unit/voucher for permanent housing reserved for them, but for which there is some other situation that prevents them from moving immediately into housing.
  - Where it has been determined to be absolutely necessary to use transitional housing to keep the client engaged prior to moving into PSH, the client must be identified as coming from “interim housing” to preserve chronic identification in reporting.
  - **This housing is not a substitute for a waiting list or for any situation other than identified here.**

### Institutional Situations

- **Foster care home or foster care group home**
- **Hospital or other residential non-psychiatric medical facility**
- **Jail, prison, or juvenile detention facility**
- **Long-term care facility or nursing home**
- **Psychiatric hospital or other psychiatric facility**
- **Substance abuse treatment facility or detox center**

### Transitional and Permanent Housing Situations

- **Transitional housing for homeless persons (including homeless youth)**
  - CoC Transitional Housing
  - HOPWA Transitional Housing
  - RHY Maternal Group Homes or TLP
  - VA GPD Bridge Housing, Service Intensive Transitional Housing, Hospital to Housing, or Clinical Treatment
  - Any locally-funded transitional housing project (facilitates movement to permanent housing with occupancy agreement for terms from 1-24 months)
- **Hotel or motel paid for without emergency shelter voucher**
- **Owned by client – with or without ongoing subsidy**
- **Permanent housing (other than RRH) for formerly homeless persons**
  - CoC Permanent Supportive Housing
  - HOPWA facility/TBRA permanent housing
- **Rental by client, with or without other housing subsidy (be specific)**
- **Residential project or halfway house with no homeless criteria** – A sober living or other residential project with no lease or rights of tenancy, with or without time limits
- **Staying or living in a family member’s or friend’s room, apartment, or house (be specific)**
- **Transitional housing for homeless persons (including homeless youth)**

### Other Situations

- **Client ‘doesn’t know’ or ‘refused’ to provide information**

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## DATA ELEMENTS for:

**1) Length of Stay in Prior Living Situation** – The length of time the client was residing in the living situation selected in “Type of Residence.”

- Indicate length of stay in most recent living situation as explained above.
- If the client moved around, but in the same type of situation, include the total time in that type of situation.
- If the client moved around from one situation to another, only include the time the client resided in the most recent situation.

**Dependent Fields A, B, and C are not applicable to ES, SH, or SO projects. Proceed to Field 3.**

- A. Did the client stay less than 90 days?
  - 90 days or more in an institutional setting is considered a “break” in homelessness, according to the definition of chronic homelessness
- B. Did the client stay less than 7 nights?
  - 7 nights or more in transitional or permanent housing situations is considered a “break” in homelessness, according to the definition of chronic homelessness.
- C. On the night before, did the client stay on the streets, ES, or SH?

**If the answer is ‘Yes’ to both Fields A and C or Fields B and C, proceed; Otherwise, stop data collection for this field.**

**2) Approximate Date Started** – Approximate date homelessness started

- Have the client look back to the date of the last time the client had a place to sleep that was not on the streets, ES, or SH.
- Including the situation the client was in right before entering, plus any continuous time moving around between the streets, and ES, or SH, determine the date this period of the client’s “literal” homelessness began.
- The look back time would not be broken by a stay of less than 7 consecutive nights in any permanent or temporary housing situation, nor would it be broken by an institutional stay of less than 90 days (i.e. jail, substance abuse or mental health treatment facility, hospital, or other similar facility).

**3) Total number of times the client has been on the streets, in ES, or SH in the past three years**

- Including today, count all the different times the client was on the streets, in an ES, or in a SH in the last 3 years where there are *full* breaks in between (i.e. breaks that are 90 days or more in an institution or 7 nights or more in permanent or transitional housing)

**4) Total number of months homeless on the street, in ES, or SH in the past three year**

- Count the cumulative number of months in which a person was on the streets, in an ES, or SH in the last 3 years, including stays in an institution < 90 days or in permanent or transitional housing < 7 days.
- Round the number of months up to the next highest number of full months.
- The current month, even if a partial month, can be counted as a full month.

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## Common Program Specific Data Elements

### 4.2 Income and Sources

Indicate if income is received from ANY source for ALL household members

- Income associated with a minor used for household expenses and support should be included in the HOH's income and sources record
- Income at start/exit should reflect the information as of the date of project start/exit
- Income record must be created at any time during a project stay if income sources change
- Income record must be created at Annual Assessment

#### DATA ELEMENTS:

**ASK clients about income from each source, rather than having them state their income sources**

- **If income is received, answer 'Yes' or 'No' to each source question and indicate an amount for each 'Yes' answer**
- **Differentiate between different income sources**
  - Earned income (from employment)
  - Unemployment Insurance
  - Social Security Income (SSI)
  - Social Security Disability Insurance (SSDI)
  - VA Service-Connected Disability Compensation (refers to benefit paid to veterans with a service-connected disability)
  - VA Non-Service Connected Disability Pension (benefit paid to wartime veterans who have limited or no income and who are ages 65 or older or, if under 65, who are permanently and totally disabled)
  - Private disability insurance
  - Worker's Compensation
  - Temporary Assistance for Needy Families (TANF), **aka CalWorks**
  - General Assistance (GA)
  - Retirement Income from Social Security (RSDI) (**Social Security Survivor benefits are Retirement Income for Social Security**)
  - Pension or retirement income from a former job (Military retirement pay should be reported under Pension or retirement income from a former job)
  - Child Support
  - Alimony and other spousal support
  - Other source (indicate source)
- **Total Monthly Income**

### 4.3 Non-cash Benefits

Indicate if non-cash benefits are received from ANY source for ALL household members

- Income associated with a minor used for household expenses and support should be included in the HOH's income and sources record
- Income at start/exit should reflect the information as of the date of project start/exit
- Income record must be created at any time during a project stay if income sources change
- Income record must be created at Annual Assessment



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## 4.4 Health Insurance

Indicate if client has Health insurance; if yes, answer 'yes' or 'no' for ALL Insurance Sources

- Medicaid (Medi-Cal) is a partnership between federal and state funds. It should always be listed as Medicaid and not State Health Insurance
- Medicare
- State Children's Health Insurance Program
- Veteran's Administration (VA) Medical Services
- Employer-Provided Health Insurance (including TRICARE – available to veterans based on military service)
- Health Insurance obtained through COBRA
- Private Pay Health Insurance
- State Health Insurance for Adults
- Indian Health Services Program
- Other (A health insurance other than the ones identified in this list)

## 4.5 – 4.10 Disability Elements

Disability update records should be created at any time during a project stay if a client's physical disability status changes.

- Answer questions for each disability type. For any 'Yes' answer, indicate if that disability is expected to be longstanding and/or substantially impair client's ability to live independently.
- No documentation is required to indicate a disability (A 'Yes' answer does not constitute a diagnosis).
- **Projects should be especially sensitive to the collection of disability information from clients under the age of 18.** In households with children accompanied by an adult, the child's disability should be based on interview with the adult in the household.
- Client report is best, but observation is allowable if client says "no" and disability is obviously present
  - Physical Disability – physical impairment
  - Developmental Disability – severe, chronic disability that is attributed to a mental or physical impairment that occurs before 22 years of age and limits the capacity for independent and economic self-sufficiency
  - Chronic Health Condition – A diagnosed condition that is more than 3 months in duration and is either not curable or has residual effects that limit daily living
  - Mental Health Problem – May range from situational depression to serious mental illness.
  - Substance Abuse – differentiate between Alcohol abuse, without drug abuse; Drug abuse, without alcohol abuse; and Both alcohol and drug abuse.

## 4.11 Domestic Violence

Domestic Violence Victim/Survivor should be indicated as "Yes" if the person has experienced any domestic violence, dating violence, sexual assault, stalking or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence.

- Be sensitive and implement appropriate interview protocols to protect the client's privacy and safety
- Clarification should be facilitated if clients information/responses are inconsistent

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## 3.20 Housing Move-in date

Record the date a client or household moves into a permanent housing unit

- RRH – a housing move in date must be entered regardless of who is providing rental assistance
  - This differentiates RRH Clients in housing from those still experiencing homelessness
- Clients who are receiving pre-housing placement services but are ultimately housed by another project or subsidy source should be exited from PH project to the appropriate permanent *Destination*.
- **For HIC and PIT purposes**, reporting households with a project start date which do not have a housing move-in date at point in time of report must be excluded from counts of persons in Permanent Housing.

## 3.11 Project Exit Date

For each client's enrollment in a project, there should only be one *Project Exit Date*. Any errors in entering the date should be corrected as soon as they are noticed.

- Each individual client in a household will have their own *Project Exit Date*
- **Residential Projects** – The last day of a continuous stay in the project before the client transfers to another residential project or otherwise stops residing in the project.
- **Non-residential Projects** – The last day a contact was made or a service was provided, or the last date of a period of ongoing service.
  - Client formally terminates their involvement or fails to return for counseling, the last date of service is the date of the last counseling session;
  - Clients may be exited when an outreach worker has been unable to locate the client for an extended period of time and there are no recorded contacts;
  - Clients may be exited upon entering another project type, finding housing, engaging with another outreach project, or passing away.

## 3.12 Destination at Exit

Select the Destination response category that *most closely matches* where the client will be staying after exiting the project

- The destination choice should reflect the client's living situation and not any particular reason why the client is staying there (e.g. school, military, family, etc.)
- Housing Project **MUST** do a Housing Assessment at exit